

VITAL and HEALTH STATISTICS
DATA FROM THE NATIONAL HEALTH SURVEY

Current Estimates

From the Health Interview Survey

United States- 1967

Provisional estimates of incidence of acute conditions, number of persons reporting limitation of activity, number of persons injured, hospital discharges, persons with hospital episodes, disability days, and frequency of physician visits. Based on data collected in the Health Interview Survey during calendar year 1967. Data on cigarette smoking status of the civilian, noninstitutional population in June 1966 and August 1967, based on data collected in the Current Population Survey, U.S. Bureau of the Census.

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IN THIS REPORT provisional statistics based on data collected in household interviews for the Health Interview Survey during calendar year 1967 are presented, for incidence of acute illnesses and injuries and associated disability days; on the percentage of the civilian, non-institutional population with limitation of activity due to chronic conditions; on the number of persons injured and associated disability days; on the number of hospital discharges and length of stay; on the number of persons with hospital episodes during the year; on the number of disability days associated with illness or injury; and for the frequency of physician visits.

Earlier reports in the annual series of Current Estimates reports covered the fiscal year from July of one year to June of the next; this report is the first in the series to cover a calendar year. The estimates shown are based on consolidation of quarterly data. Due to the provisional nature of these estimates they may, in some instances, differ slightly from revised data released at a later date. Estimates in this report are based on health interviews employing two different approaches to data collection. An appendix to the report discusses the forms of questionnaire design and the reasons for the change in data collection procedures.

A section of this report presents provisional findings on cigarette smoking habits in the civilian, noninstitutional population aged 17 years and older. These data were collected as supplements to the June 1966 and August 1967 Current Population Survey conducted by the U.S. Bureau of the Census.

SYMBOLS

| | |
|--|-----|
| Data not available----- | --- |
| Category not applicable----- | ... |
| Quantity zero----- | - |
| Quantity more than 0 but less than 0.05---- | 0.0 |
| Figure does not meet standards of reliability or precision----- | * |

CURRENT ESTIMATES

FROM THE HEALTH INTERVIEW SURVEY

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INTRODUCTION

Estimates shown in this report are the first statistics from the Health Interview Survey to be published on a calendar-year basis. Previously most of the reports based on health interviews included data for the fiscal year beginning in July and ending in June of the next year. In accordance with a long-range plan set up during the early years of the Health Interview Survey, a general evaluation of the design and format of the survey was made on the completion of its first 10 years in June 1967. As a result, certain changes have been made in the conduct of the survey, one of which is the collection of data to provide estimates for a calendar year. To set the stage for the presentation of data on a calendar basis, this report shows estimates for most health topics for the year 1967, even though the collection year did not change officially until January 1968. Six months of data collection, January-June 1967, included in this report were also included in the Current Estimates report covering the period July 1966-June 1967 (Series 10, No. 43).

The evaluation of the survey procedures also led to major changes in the format of the questionnaire and the conduct of the interview. During the year prior to the final acceptance of these procedural changes, July 1967-June 1968, the sample was divided in two parts with one half interviewed according to the existing procedures and the other half interviewed according to the proposed new format. The "split sample" provided a means of evaluating the efficiency of the new questionnaire as well as some measure of any changes in the levels of health-related estimates that might be

associated with the procedural innovations. Descriptive material on the modifications made in the questionnaire and the reasons for initiating format and procedural changes are presented in appendix III.

In short, the questionnaire administered to sample persons in the Health Interview Survey during the 10-year period ending in June 1967, and to one-half of the sample persons during the following year, represented the "condition approach" in the collection of health data. Information on illnesses was first obtained through probe questions and checklists of conditions followed by questions on associated short-term and long-term disability attributed to the illnesses. The revised questionnaire, administered to one-half of the sample during the year July 1967-June 1968 and adopted for the entire sample in July 1968, is usually described as the "person approach." Persons are questioned about their short-term and long-term disability, as well as their recent medical care, with conditions and illnesses named as causes of disability or medical attention. Facsimiles of the two versions of the questionnaire used during the period July 1967-June 1968 are shown in appendixes IV and V.

Another procedural change in the collection of data was the decision to abandon the broad, general checklists of chronic conditions, which included all types of chronic illness, in favor of the use of a listing restricted to conditions affecting a particular body system. By the use of a planned 5-6-year cycle, each year changing the body system to be covered, it is expected that improved prevalence estimates for all kinds of illnesses can eventually be derived from the in-

interview-survey data. However, this procedure precludes the derivation and publication of annual estimates of persons with one or more chronic conditions, a measure which had been used in the Current Estimates reports as an indicator of the amount of chronic illness in the population.

Preliminary investigation of the comparative estimates produced from the two versions of the questionnaire for the period July-December 1967 indicates that the variations are within the limits of sampling error. The material collected by means of the "person approach" during July-December 1967 has, therefore, been combined with the material collected by the "condition approach" from the remainder of the sample during the calendar year, and these composite data are the estimates shown in this report.

HIGHLIGHTS FOR THE PERIOD

Acute Conditions

During 1967 an estimated 367.5 million acute illnesses and injuries requiring either medical attention or reduced daily activity occurred among the civilian, noninstitutional population (table 1). The annual incidence rate per 100 persons was 190.0, which is about the same as the rate of 190.2 reported for the period July 1966-June 1967 (see Series 10, No. 43). There was some change in the rates for the sexes; the rate for males was about 1.3 percent lower than the incidence rate of 185.4 in fiscal year 1967, while the rate for females was 0.9 percent higher than the rate of 194.7 for fiscal year 1967. There was also some change in the age-specific rates shown in table 2. The incidence rate for persons aged 6-16 years was 2.4 percent lower than that for fiscal year 1967, and the rates for persons 17 years and older were higher than those in fiscal year 1967. Changes in rates for upper respiratory illnesses, notably the common cold, and for influenza-like illnesses are primarily responsible for the differences in incidence rates by sex and age. The beginning of an epidemic of influenza-like illness late in 1967 resulted in a slightly higher rate in this condition category for the calendar year; the rise was accompanied by a compensating decline in the rate for upper respiratory illnesses.

The number of days of restricted activity and bed disability per person per year caused by acute illness and injury was higher in calendar year 1967 than in the 12-month period ending in June 1967 (tables 3-6). The increase in rates was greater for females than for males and occurred in each age group except for 6-16 years. An increase in rates was noted in most of the condition groups but was greatest for respiratory conditions, notably for influenza-like conditions. The rate of days lost from school due to acute conditions was lower in calendar year 1967 compared with fiscal year 1967 for boys aged 6-16 years, but the rate for girls was slightly higher (table 7). The annual number of days lost from work per currently employed person was generally higher for calendar year 1967 when compared with the fiscal year ending in June 1967. This rise in rate occurred for males and females and for both age groups shown in table 8.

Persons With Limitation of Activity

Table 9 in the previous Current Estimates report (Series 10, No. 43) showed the percentage of the population with one or more chronic conditions. As explained earlier, it is not possible to obtain an estimate of the number of persons with chronic conditions when the "person approach" is used in the collection of data. Therefore, table 9 in this report, comparable to table 9 in the previous report, has been changed to show the proportion of the population with limitation of activity due to chronic diseases or impairments. During calendar year 1967 an estimated 22.2 million persons, or 11.5 percent of the civilian, noninstitutional population, had some degree of activity limitation; this included 8.7 percent with limitation in their major activity (i.e., working, keeping house, or engaging in school or preschool activities). These figures can be compared with those published for July 1965-June 1966 (Series 10, No. 45), which showed that 21.4 million persons, 11.2 percent of the population, had some degree of limitation of activity and 8.4 percent had limitation in major activity. As might be expected, the proportion of limited persons increased with age and was higher for males than for females in all age groups.

Persons Injured

During 1967 an estimated 53.0 million persons were injured, i.e., 27.4 persons were injured per 100 population (table 10). This rate is slightly higher than the rate of 26.9 for the period July 1966-June 1967. The numbers of days of restricted activity and bed-stay associated with injuries, per injured person, were less during the calendar year than during the fiscal year (tables 11 and 12).

About 3.8 million persons were injured in moving motor-vehicle accidents (table 10); of this number 3.6 million were injured in traffic accidents, that is, moving motor vehicle accidents occurring on a public highway. The rate of persons injured in moving motor vehicle accidents was 2.0 per 100 persons per year, slightly higher than that for the fiscal year ending in June 1967. The rate of persons injured while at work was about 11.1 percent lower than that for the fiscal year. There was almost no change in the rate of injuries in the home and only a small increase in the rate for injuries classified as other, that is, those not occurring in moving motor vehicle accidents, at work, or in the home (for instance, public places, school, and places of recreation).

Hospitalization

Tables 13-15 present two measures of hospital utilization as reported in the Health Interview Survey. Table 13 shows the annual number of short-stay hospital discharges involving one or more nights occurring during reference periods ending in 1967. The term reference periods is used because health interviews were conducted in a new sample of households during each week of the year. To adjust for underreporting due to memory bias, estimates of hospital discharges were derived by doubling the weight attached to those discharges reported during the 6 months prior to interview. These estimates do not include any adjustment for hospitalization of persons who died prior to the time of interview; also, these estimates will differ from those reported by the Hospital Discharge Survey because of differences in types of hospitals, in the population covered by the surveys, and in the methods of data collection used.

Table 14 shows the number of persons in the civilian, noninstitutional population who had one or more episodes of hospitalization in short-stay hospitals during the year prior to interview. In order to accumulate the number of hospital episodes experienced by a person in a given year, the 12-month reference period used on the questionnaire was retained in estimating the number of episodes. The number of episodes includes some episodes for persons who were still hospitalized at the end of the reference period; these episodes are excluded by definition from the number of discharges (episodes which ended during the period). Even though the number of hospital episodes would be expected to exceed the number of discharges because of the inclusion of persons still in the hospital in the number of episodes, the number of hospital episodes actually represents only about 95 percent of the number of hospital discharges during the year. The memory bias involved in the 12-month period seems to account for the reduced reporting of episodes.

The number of short-stay hospital discharges per 100 persons per year—12.3 in calendar year 1967—was slightly less than the rate of 12.6 in fiscal year 1967 (table 13). The rate for persons 65 years and over was the same for both periods. The average length of stay remained approximately the same for both periods. About 9.8 percent of the population had one or more hospital episodes in 1967 (table 14); most (8.4 percent) of these persons had only one such episode. Among the 16.2 million persons with one episode (table 14) the average length of the episodes was 7.7 days (table 15). Persons with two episodes averaged 19.3 days in the year, while persons with three or more episodes had an average of 35.3 days.

Disability Days

The numbers of disability days per person resulting from acute and chronic illnesses, impairments, and injury are reported in tables 16 and 17. Person-days of disability represent unduplicated counts of condition days of restricted activity, bed-stay, work-loss, and school-loss.

The rates of disability days per person for calendar year 1967 were very similar to those for fiscal year 1967: 15.3 days of restricted

activity compared with 15.4; 5.7 days in bed, with 5.6; 5.4 days lost from work per currently employed person, with 5.4; and 4.4 days lost from school per child aged 6-16 years, with 4.5 days in fiscal year 1967.

Physician Visits

During 1967 there were an estimated 829.6 million physician visits, excluding visits to hospital inpatients (table 18). A physician visit is a consultation with a doctor of medicine or an osteopath, either in person or by telephone, for examination, treatment, or advice. The service could have been provided by the physician himself, or by a nurse or another person acting under the supervision of the physician.

The number of visits per person per year was the same in calendar year 1967 when compared with the fiscal year ending in June 1967 for both sexes, for males, and for females. The rates of visits were similar at each age group up to 65 years, but beyond that age the rate of visits per person was lower in calendar year 1967 than in fiscal year 1967.

Table 19 shows that 68.8 percent of the civilian, noninstitutional population saw or talked with a physician within a year of the interview. This percentage is only slightly higher than the 68.1 percent for fiscal year 1967.

Seasonal Variation

Tables 21-23 and figures 1-3 present quarterly estimates for July-September 1967 and October-December 1967 which were not shown in the previous Current Estimates report. The rise in rate of acute respiratory illnesses in October-December reflects the beginning of the influenza epidemic in January 1968.

CIGARETTE SMOKING STATUS OF THE POPULATION, 1966 AND 1967

Because of the interest in the cigarette smoking habits of the people of the United States, the National Center for Health Statistics has contracted with the U.S. Bureau of the Census to include, for several years, a supplement to the Current Population Survey on the smoking habits of the population. The first of these supplements

was included in the Current Population Survey of June 1966, and the second was added to the questionnaire in August 1967. This information will supplement data on smoking habits and health characteristics collected at intervals beginning in 1964 as a part of the ongoing Health Interview Survey.

Data on the cigarette smoking habits of the civilian, noninstitutional population aged 17 years and over are summarized in tables 24 and 25. In June 1966 an estimated 39.6 percent of the population 17 years and older smoked cigarettes; in August 1967 the comparative percentage was 39.1. The percentage of persons who had formerly smoked cigarettes was 11.5 in 1966 and 12.3 in 1967. An estimated 46.4 percent of the population in 1966 and 46.2 percent in 1967 reported having never smoked cigarettes. For about 2.5 percent in both 1966 and 1967 it was not known whether these persons had ever smoked cigarettes.

Examination of the data by age and sex shows that the reduction in cigarette smoking reported in the second survey occurred primarily among males under 65 years of age and to some extent among females under 45 years of age. Increases in the percent currently smoking were reported for males 65 years and older and for females aged 45 years and over.

It is of interest that the type of respondent, i.e., self-respondent or proxy, in the interview had little effect on the rate of present smokers for males, but an appreciable effect on "presently smoking" rates for females. A self-respondent is a person who has responded for himself in the household interview. "Proxy" respondent means that another person has responded for this family member. Proxy respondents are employed for persons not available at the time of the interview, provided the respondent was closely related to the person about whom the information was obtained. The percentages of present smokers for self-respondents and proxy respondents are:

| | <i>1966</i> | <i>Male</i> | <i>Female</i> |
|------------|-------------|-------------|---------------|
| Self----- | | 50.1 | 33.7 |
| Proxy----- | | 49.3 | 27.6 |
| | <i>1967</i> | | |
| Self----- | | 48.8 | 33.8 |
| Proxy----- | | 48.7 | 26.9 |

SOURCE AND LIMITATIONS OF THE DATA

Health Interview Survey

The information from the Health Interview Survey presented in this report is based on data collected in a continuing nationwide survey conducted by household interview. Each week a probability sample of households is interviewed by trained personnel of the U.S. Bureau of the Census to obtain information about the health and other characteristics of each member of the household in the civilian, noninstitutional population of the United States. During the 52 weeks in 1967, the sample was composed of approximately 42,000 households containing about 134,000 persons living at the time of the interview.

A description of the design of the survey, the methods used in estimation, and general qualifications of the data obtained from surveys is presented in appendix I. Since the estimates shown in this report are based on a sample of the population rather than on the entire population, they are subject to sampling error. Therefore, particular attention should be paid to the section entitled "Reliability of Estimates." Sampling errors for most of the estimates are of relatively low magnitude. However, where an estimated number or the numerator or denominator of a rate or percentage is small, the sampling error may be high. Charts of relative sampling errors and instructions for their use are shown in appendix I.

Certain terms used in this report are defined in appendix II. Some of the terms have specialized meanings for the purpose of the survey. For example, estimates of the incidence of acute conditions include, with certain exceptions, those conditions which had started within 2 weeks and which involved either medical attention or restricted activity. The exceptions, which are listed in appendix II, are certain conditions such as heart trouble and diabetes which are always considered to be chronic, regardless of duration or onset.

Estimates of the number of disability days associated with acute conditions are derived from the number of days of disability experienced during the 2-week period prior to the week of interview and include all such days reported,

even if the acute condition causing the disability had its onset prior to the 2-week period. Disability days associated with acute conditions are recorded on a condition basis. If an individual reports more than one illness or injury on the same day, the count of disability days will exceed the actual number of days disabled, i.e., person-days of disability.

Current Population Survey

The information from the Current Population Survey of the U.S. Bureau of the Census on cigarette smoking habits of the civilian, noninstitutional population was collected in household interviews in June 1966 and August 1967. A supplement was added to the basic Current Population Survey for each of these months to derive information as to the smoking habits of the population. The information in tables 24 and 25 was obtained from the questions shown below:

Has ... smoked at least 100 cigarettes during his entire life?

Does ... smoke cigarettes now?

These two questions were worded alike in both supplements.

The Current Population Survey's sample design in June 1966 was spread over 357 areas comprising 701 counties and independent cities, with coverage in each of the 50 States and the District of Columbia. Approximately 35,000 households, which contained about 75,000 persons 17 years of age or over, were designated for inclusion in the survey. About 1,500 of these households were visited, but interviews were not obtained because the occupants either were not found at home after repeated calls or were unavailable for some other reason. Noninterview adjustment factors are employed to take into account these noninterviewed households. During August 1967 the Current Population Survey sample consisted of about 52,500 households with a noninterview rate of about 4.5 percent.

Since the estimates based on these data are obtained from a sample, they are subject to sampling variability and to errors of response and reporting. The standard error is primarily a measure of sampling variability, that is, the variations that occur by chance because a sample rather than the entire population is surveyed.

Approximations of the standard errors of the estimates have been computed. Standard error tables for June 1966 and August 1967 have been prepared; the order of magnitude of these errors for percentages shown in tables 24 and 25 is summarized below:

| | <i>Percentage</i> | | |
|-------------------------|-------------------|-----------|-----------|
| | <i>10</i> | <i>25</i> | <i>50</i> |
| <i>June 1966 base</i> | | | |
| 10,000,000----- | 0.4 | 0.6 | 0.6 |
| 25,000,000----- | 0.2 | 0.4 | 0.4 |
| 50,000,000----- | 0.2 | 0.3 | 0.3 |
| 100,000,000----- | 0.1 | 0.2 | 0.3 |
| <i>August 1967 base</i> | | | |
| 10,000,000----- | 0.3 | 0.5 | 0.5 |
| 25,000,000----- | 0.2 | 0.3 | 0.3 |
| 50,000,000----- | 0.1 | 0.2 | 0.2 |
| 100,000,000----- | 0.1 | 0.2 | 0.2 |

The standard error of the difference between two percentages is approximately the square root of the sum of squares of the standard error of each estimate considered separately. For instance, the percentages of present smokers among males in 1966 and 1967 were 48.6 and 47.8, respectively. Linear interpolation from the above table indicates that for populations of 58.5 million and 59.2 million the standard errors of these percentages are about 0.3 in 1966 and 0.2 in 1967. Thus, the standard error of the difference is about 0.36. The observed difference between the two percentages is 0.8. This difference divided by the standard error of the difference between the two percentages (0.8/0.36) gives a value of 2.2. This value means that a difference of 0.8 percentage points may occur by chance alone about three times out of 100 observations. Thus, this difference may be considered statistically significant.

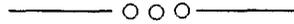


TABLE 1. INCIDENCE OF ACUTE CONDITIONS, PERCENT DISTRIBUTION, AND NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| CONDITION GROUP | INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS | | | PERCENT DISTRIBUTION | | | NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR | | |
|--|--|---------|---------|----------------------|-------|--------|---|-------|--------|
| | BOTH SEXES | MALE | FEMALE | BOTH SEXES | MALE | FEMALE | BOTH SEXES | MALE | FEMALE |
| ALL ACUTE CONDITIONS----- | 367,453 | 170,606 | 196,847 | 100.0 | 100.0 | 100.0 | 190.0 | 183.0 | 196.5 |
| INFECTIVE AND PARASITIC DISEASES--- | 44,174 | 21,153 | 23,020 | 12.0 | 12.4 | 11.7 | 22.8 | 22.7 | 23.0 |
| COMMON CHILDHOOD DISEASES----- | 8,884 | 4,609 | 4,275 | 2.4 | 2.7 | 2.2 | 4.6 | 4.9 | 4.3 |
| THE VIRUS, N.O.S.----- | 26,642 | 11,978 | 14,664 | 7.3 | 7.0 | 7.4 | 13.8 | 12.9 | 14.6 |
| OTHER INFECTIVE AND PARASITIC DISEASES----- | 8,648 | 4,567 | 4,081 | 2.4 | 2.7 | 2.1 | 4.5 | 4.9 | 4.1 |
| RESPIRATORY CONCITIONS----- | 204,581 | 93,951 | 110,630 | 55.7 | 55.1 | 56.2 | 105.8 | 100.8 | 110.4 |
| UPPER RESPIRATORY CONCITIONS----- | 132,318 | 61,037 | 71,280 | 36.0 | 35.8 | 36.2 | 68.4 | 65.5 | 71.1 |
| COMMON COLD----- | 103,513 | 47,515 | 55,998 | 28.2 | 27.9 | 28.4 | 53.5 | 51.0 | 55.9 |
| OTHER ACUTE UPPER RESPIRATORY CONCITIONS----- | 28,805 | 13,522 | 15,283 | 7.8 | 7.9 | 7.8 | 14.9 | 14.5 | 15.3 |
| INFLUENZA----- | 64,760 | 29,392 | 35,668 | 17.6 | 17.1 | 18.1 | 33.5 | 31.2 | 35.6 |
| INFLUENZA WITH DIGESTIVE MANIFESTATIONS----- | 8,975 | 4,093 | 4,882 | 2.4 | 2.4 | 2.5 | 4.6 | 4.4 | 4.9 |
| OTHER INFLUENZA----- | 55,785 | 24,999 | 30,786 | 15.2 | 14.7 | 15.6 | 28.8 | 26.8 | 30.7 |
| OTHER RESPIRATORY CONCITIONS----- | 7,504 | 3,822 | 3,682 | 2.0 | 2.2 | 1.9 | 3.9 | 4.1 | 3.7 |
| PNEUMONIA----- | 2,110 | 1,205 | 905 | 0.6 | 0.7 | 0.5 | 1.1 | 1.3 | 0.9 |
| BRONCHITIS----- | 3,719 | 1,822 | 1,897 | 1.0 | 1.1 | 1.0 | 1.9 | 2.0 | 1.9 |
| OTHER ACUTE RESPIRATORY CONCITIONS----- | 1,675 | 795 | * | 0.5 | 0.5 | * | 0.9 | 0.9 | * |
| DIGESTIVE SYSTEM CONDITIONS----- | 16,538 | 7,836 | 8,702 | 4.5 | 4.6 | 4.4 | 8.6 | 8.4 | 8.7 |
| DENTAL CONDITIONS----- | 5,671 | 2,360 | 3,311 | 1.5 | 1.4 | 1.7 | 2.9 | 2.5 | 3.3 |
| FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.----- | 3,533 | 1,495 | 2,038 | 1.0 | 0.9 | 1.0 | 1.8 | 1.6 | 2.0 |
| OTHER DIGESTIVE SYSTEM CONDITIONS----- | 7,334 | 3,980 | 3,354 | 2.0 | 2.3 | 1.7 | 3.8 | 4.3 | 3.3 |
| INJURIES----- | 55,503 | 31,709 | 23,794 | 15.1 | 18.6 | 12.1 | 28.7 | 34.0 | 23.7 |
| FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS----- | 16,124 | 9,270 | 6,855 | 4.4 | 5.4 | 3.5 | 8.3 | 9.9 | 6.8 |
| FRACTURES AND DISLOCATIONS----- | 5,554 | 3,233 | 2,322 | 1.5 | 1.9 | 1.2 | 2.9 | 3.5 | 2.3 |
| SPRAINS AND STRAINS----- | 10,570 | 6,037 | 4,533 | 2.9 | 3.5 | 2.3 | 5.5 | 6.5 | 4.5 |
| OPEN WOUNDS AND LACERATIONS----- | 15,721 | 9,455 | 6,266 | 4.3 | 5.5 | 3.2 | 8.1 | 10.1 | 6.3 |
| CONTUSIONS AND SUPERFICIAL INJURIES----- | 10,006 | 4,992 | 5,013 | 2.7 | 2.9 | 2.5 | 5.2 | 5.4 | 5.0 |
| OTHER CURRENT INJURIES----- | 13,652 | 7,992 | 5,660 | 3.7 | 4.7 | 2.9 | 7.1 | 8.6 | 5.6 |
| ALL OTHER ACUTE CONDITIONS----- | 46,657 | 15,957 | 30,701 | 12.7 | 9.4 | 15.6 | 24.1 | 17.1 | 30.6 |
| DISEASES OF THE EAR----- | 9,115 | 4,554 | 4,561 | 2.5 | 2.7 | 2.3 | 4.7 | 4.9 | 4.6 |
| HEADACHES----- | 3,428 | 860 | 2,568 | 0.9 | 0.5 | 1.3 | 1.8 | 0.9 | 2.6 |
| GENTOURINARY DISORDERS----- | 6,129 | 723 | 5,407 | 1.7 | 0.4 | 2.7 | 3.2 | 0.8 | 5.4 |
| DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM----- | 4,252 | *** | 4,252 | 1.2 | *** | 2.2 | 2.2 | *** | 4.2 |
| DISEASES OF THE SKIN----- | 5,047 | 2,054 | 2,993 | 1.4 | 1.2 | 1.5 | 2.6 | 2.2 | 3.0 |
| DISEASES OF THE MUSCULOSKELETAL SYSTEM----- | 4,202 | 1,528 | 2,674 | 1.1 | 0.9 | 1.4 | 2.2 | 1.6 | 2.7 |
| ALL OTHER ACUTE CONDITIONS----- | 14,483 | 6,237 | 8,245 | 3.9 | 3.7 | 4.2 | 7.5 | 6.7 | 8.2 |

NOTE: Excluded from these statistics are all conditions involving neither restricted activity nor medical attention.

N.o.s.—not otherwise specified; n.e.c.—not elsewhere classified.

TABLE 2. INCIDENCE OF ACUTE CONDITIONS AND NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| SEX AND CONDITION GROUP | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER |
|---------------------------------------|--|---------|--------|---------|-----------|---|---------|-------|-------|-----------|
| <u>BOTH SEXES</u> | INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS | | | | | NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR | | | | |
| ALL ACUTE CONDITIONS-- | 367,453 | 78,287 | 99,186 | 121,486 | 68,494 | 190.0 | 334.7 | 227.0 | 176.8 | 118.9 |
| INFECTIVE AND PARASITIC DISEASES----- | 44,174 | 11,449 | 15,679 | 12,041 | 5,005 | 22.8 | 48.9 | 35.9 | 17.5 | 8.7 |
| RESPIRATORY CONDITIONS-- | 204,581 | 46,546 | 56,314 | 64,252 | 37,469 | 105.8 | 199.0 | 128.9 | 93.5 | 65.1 |
| UPPER RESPIRATORY CONDITIONS----- | 132,318 | 35,433 | 37,211 | 37,652 | 22,021 | 68.4 | 151.5 | 85.2 | 54.8 | 38.2 |
| INFLUENZA----- | 64,760 | 8,465 | 17,562 | 24,656 | 14,077 | 33.5 | 36.2 | 40.2 | 35.9 | 24.4 |
| OTHER RESPIRATORY CONDITIONS----- | 7,504 | 2,648 | 1,541 | 1,943 | 1,372 | 3.9 | 11.3 | 3.5 | 2.8 | 2.4 |
| DIGESTIVE SYSTEM CONDITIONS----- | 16,538 | 3,267 | 3,979 | 5,573 | 3,719 | 8.6 | 14.0 | 9.1 | 8.1 | 6.5 |
| INJURIES----- | 55,503 | 8,922 | 13,168 | 20,989 | 12,424 | 28.7 | 38.1 | 30.1 | 30.5 | 21.6 |
| ALL OTHER ACUTE CONDITIONS----- | 46,657 | 8,103 | 10,046 | 18,631 | 9,877 | 24.1 | 34.6 | 23.0 | 27.1 | 17.1 |
| <u>MALE</u> | INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS | | | | | NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR | | | | |
| ALL ACUTE CONDITIONS-- | 170,606 | 40,977 | 51,063 | 48,600 | 29,966 | 183.0 | 342.5 | 230.6 | 150.1 | 112.1 |
| INFECTIVE AND PARASITIC DISEASES----- | 21,153 | 6,087 | 8,394 | 4,733 | 1,940 | 22.7 | 50.9 | 37.9 | 14.6 | 7.3 |
| RESPIRATORY CONDITIONS-- | 93,951 | 23,893 | 27,830 | 25,646 | 16,582 | 100.6 | 199.7 | 125.7 | 79.2 | 62.0 |
| UPPER RESPIRATORY CONDITIONS----- | 61,037 | 18,112 | 17,972 | 15,447 | 9,507 | 65.5 | 151.4 | 81.2 | 47.7 | 35.6 |
| INFLUENZA----- | 29,092 | 4,161 | 9,020 | 9,437 | 6,474 | 31.2 | 34.8 | 40.7 | 29.2 | 24.2 |
| OTHER RESPIRATORY CONDITIONS----- | 3,822 | 1,620 | 839 | 762 | * | 4.1 | 13.5 | 3.8 | 2.4 | * |
| DIGESTIVE SYSTEM CONDITIONS----- | 7,836 | 1,774 | 1,917 | 2,267 | 1,878 | 8.4 | 14.8 | 8.7 | 7.0 | 7.0 |
| INJURIES----- | 31,709 | 5,229 | 8,457 | 12,094 | 5,929 | 34.0 | 43.7 | 38.2 | 37.4 | 22.2 |
| ALL OTHER ACUTE CONDITIONS----- | 15,957 | 3,994 | 4,466 | 3,860 | 3,636 | 17.1 | 33.4 | 20.2 | 11.9 | 13.6 |
| <u>FEMALE</u> | INCIDENCE OF ACUTE CONDITIONS IN THOUSANDS | | | | | NUMBER OF ACUTE CONDITIONS PER 100 PERSONS PER YEAR | | | | |
| ALL ACUTE CONDITIONS-- | 196,847 | 37,309 | 48,123 | 72,886 | 38,529 | 196.5 | 326.5 | 223.4 | 200.5 | 124.8 |
| INFECTIVE AND PARASITIC DISEASES----- | 23,020 | 5,362 | 7,285 | 7,308 | 3,065 | 23.0 | 46.9 | 33.8 | 20.1 | 9.9 |
| RESPIRATORY CONDITIONS-- | 110,630 | 22,653 | 28,484 | 38,606 | 20,887 | 110.4 | 198.2 | 132.2 | 106.2 | 67.7 |
| UPPER RESPIRATORY CONDITIONS----- | 71,280 | 17,321 | 19,239 | 22,206 | 12,514 | 71.1 | 151.6 | 89.3 | 61.1 | 40.5 |
| INFLUENZA----- | 35,668 | 4,304 | 8,542 | 15,220 | 7,602 | 35.6 | 37.7 | 39.6 | 41.9 | 24.6 |
| OTHER RESPIRATORY CONDITIONS----- | 3,682 | 1,028 | 702 | 1,181 | 771 | 3.7 | 9.0 | 3.3 | 3.2 | 2.5 |
| DIGESTIVE SYSTEM CONDITIONS----- | 8,702 | 1,493 | 2,062 | 3,306 | 1,841 | 8.7 | 13.1 | 9.6 | 9.1 | 6.0 |
| INJURIES----- | 23,794 | 3,693 | 4,712 | 8,895 | 6,494 | 23.7 | 32.3 | 21.9 | 24.5 | 21.0 |
| ALL OTHER ACUTE CONDITIONS----- | 30,701 | 4,109 | 5,581 | 14,771 | 6,241 | 30.6 | 36.0 | 25.9 | 40.6 | 20.2 |

NOTE: Excluded from these statistics are all conditions involving neither restricted activity nor medical attention.

TABLE 3. DAYS OF RESTRICTED ACTIVITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| CONDITION GROUP | DAYS OF RESTRICTED ACTIVITY IN THOUSANDS | | | DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR | | |
|--|---|---------|---------|---|-------|--------|
| | BOTH SEXES | MALE | FEMALE | BOTH SEXES | MALE | FEMALE |
| ALL ACUTE CONDITIONS----- | 1,455,088 | 638,154 | 816,934 | 752.4 | 684.6 | 815.4 |
| INFECTIVE AND PARASITIC DISEASES--- | 177,177 | 85,914 | 91,263 | 91.6 | 92.2 | 91.1 |
| COMMON CHILDHOOD DISEASES----- | 54,269 | 28,579 | 25,690 | 28.1 | 30.7 | 25.6 |
| THE VIRUS, N.O.S.----- | 79,628 | 34,894 | 44,734 | 41.2 | 37.4 | 44.6 |
| OTHER INFECTIVE AND PARASITIC DISEASES----- | 43,280 | 22,441 | 20,839 | 22.4 | 24.1 | 20.8 |
| RESPIRATORY CONDITIONS----- | 653,665 | 286,295 | 367,370 | 338.0 | 307.1 | 366.7 |
| UPPER RESPIRATORY CONDITIONS----- | 352,180 | 158,736 | 193,444 | 182.1 | 170.3 | 193.1 |
| COMMON COLD----- | 266,187 | 120,722 | 145,464 | 137.6 | 129.5 | 145.2 |
| OTHER ACUTE UPPER RESPIRATORY CONDITIONS----- | 85,993 | 38,014 | 47,980 | 44.5 | 40.8 | 47.9 |
| INFLUENZA----- | 241,622 | 99,708 | 141,915 | 124.9 | 107.0 | 141.6 |
| INFLUENZA WITH DIGESTIVE MANIFESTATIONS----- | 25,466 | 11,342 | 14,123 | 13.2 | 12.2 | 14.1 |
| OTHER INFLUENZA----- | 216,157 | 88,366 | 127,791 | 111.8 | 94.8 | 127.5 |
| OTHER RESPIRATORY CONDITIONS----- | 59,862 | 27,851 | 32,011 | 31.0 | 29.9 | 31.9 |
| PNEUMONIA----- | 29,441 | 12,894 | 16,547 | 15.2 | 13.8 | 16.5 |
| BRONCHITIS----- | 25,820 | 12,736 | 13,083 | 13.4 | 13.7 | 13.1 |
| OTHER ACUTE RESPIRATORY CONDITIONS----- | 4,602 | 2,221 | 2,381 | 2.4 | 2.4 | 2.4 |
| DIGESTIVE SYSTEM CONDITIONS----- | 67,964 | 31,251 | 36,712 | 35.1 | 33.5 | 36.6 |
| DENTAL CONDITIONS----- | 17,922 | 6,402 | 11,521 | 9.3 | 6.9 | 11.5 |
| FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.----- | 7,277 | 3,291 | 3,986 | 3.8 | 3.5 | 4.0 |
| OTHER DIGESTIVE SYSTEM CONDITIONS----- | 42,764 | 21,558 | 21,206 | 22.1 | 23.1 | 21.2 |
| INJURIES----- | 332,088 | 169,824 | 162,264 | 171.7 | 182.2 | 162.0 |
| FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS----- | 183,387 | 92,308 | 91,079 | 94.8 | 99.0 | 90.9 |
| FRACTURES AND DISLOCATIONS----- | 107,990 | 53,454 | 54,536 | 55.8 | 57.3 | 54.4 |
| SPRAINS AND STRAINS----- | 75,397 | 38,854 | 36,543 | 39.0 | 41.7 | 36.5 |
| OPEN WOUNDS AND LACERATIONS----- | 48,157 | 28,088 | 20,070 | 24.9 | 30.1 | 20.0 |
| CONTUSIONS AND SUPERFICIAL INJURIES----- | 45,569 | 19,100 | 26,468 | 23.6 | 20.5 | 26.4 |
| OTHER CURRENT INJURIES----- | 54,974 | 30,327 | 24,647 | 28.4 | 32.5 | 24.6 |
| ALL OTHER ACUTE CONDITIGNS----- | 224,195 | 64,870 | 159,325 | 115.9 | 69.6 | 159.0 |
| DISEASES OF THE EAR----- | 31,104 | 15,665 | 15,438 | 16.1 | 16.8 | 15.4 |
| HEADACHES----- | 4,342 | 1,788 | 2,554 | 2.2 | 1.9 | 2.5 |
| GENITOURINARY DISORDERS----- | 34,431 | 5,298 | 29,132 | 17.8 | 5.7 | 29.1 |
| DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM---- | 41,830 | ... | 41,830 | 21.6 | ... | 41.8 |
| DISEASES OF THE SKIN----- | 14,664 | 5,071 | 9,593 | 7.6 | 5.4 | 9.6 |
| DISEASES OF THE MUSCULOSKELETAL SYSTEM----- | 27,318 | 8,891 | 18,427 | 14.1 | 9.5 | 18.4 |
| ALL OTHER ACUTE CONDITIONS----- | 70,507 | 28,157 | 42,350 | 36.5 | 30.2 | 42.3 |

NOTE: N.o.s.—not otherwise specified; n.e.c.—not elsewhere classified.

TABLE 4. DAYS OF BED DISABILITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix III]

| CONDITION GROUP | DAYS OF BED DISABILITY IN THOUSANDS | | | DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR | | |
|--|--|---------|---------|--|-------|--------|
| | BOTH SEXES | MALE | FEMALE | BOTH SEXES | MALE | FEMALE |
| ALL ACUTE CONDITIONS----- | 611,158 | 264,635 | 346,523 | 316.0 | 283.9 | 345.9 |
| INFECTIVE AND PARASITIC DISEASES--- | 84,496 | 39,792 | 44,704 | 43.7 | 42.7 | 44.6 |
| COMMON CHILDHOOD DISEASES----- | 20,157 | 9,127 | 11,030 | 10.4 | 9.8 | 11.0 |
| THE VIRUS, N.O.S.----- | 41,872 | 18,163 | 23,708 | 21.7 | 19.5 | 23.7 |
| OTHER INFECTIVE AND PARASITIC DISEASES----- | 22,466 | 12,501 | 9,967 | 11.6 | 13.4 | 9.9 |
| RESPIRATORY CONDITIONS----- | 315,636 | 138,761 | 176,875 | 163.2 | 148.9 | 176.5 |
| UPPER RESPIRATORY CONDITIONS----- | 149,469 | 67,945 | 81,524 | 77.3 | 72.9 | 81.4 |
| COMMON COLD----- | 109,574 | 50,114 | 59,460 | 56.7 | 53.8 | 59.3 |
| OTHER ACUTE UPPER RESPIRATORY CONDITIONS----- | 39,896 | 17,831 | 22,065 | 20.6 | 19.1 | 22.0 |
| INFLUENZA----- | 132,857 | 55,203 | 77,654 | 68.7 | 59.2 | 77.5 |
| INFLUENZA WITH DIGESTIVE MANIFESTATIONS----- | 14,059 | 6,788 | 7,271 | 7.3 | 7.3 | 7.3 |
| OTHER INFLUENZA----- | 118,798 | 48,416 | 70,383 | 61.4 | 51.9 | 70.2 |
| OTHER RESPIRATORY CONDITIONS----- | 33,310 | 15,612 | 17,697 | 17.2 | 16.7 | 17.7 |
| PNEUMONIA----- | 16,936 | 8,138 | 8,799 | 8.8 | 8.7 | 8.8 |
| BRONCHITIS----- | 15,077 | 7,064 | 8,012 | 7.8 | 7.6 | 8.0 |
| OTHER ACUTE RESPIRATORY CONDITIONS----- | * | * | * | * | * | * |
| DIGESTIVE SYSTEM CONDITIONS----- | 33,287 | 16,021 | 17,266 | 17.2 | 17.2 | 17.2 |
| DENTAL CONDITIONS----- | 7,363 | 3,263 | 4,101 | 3.8 | 3.5 | 4.1 |
| FUNCTIONAL AND SYMPTOMATIC UPPER GASTROINTESTINAL DISORDERS, N.E.C.----- | 3,960 | 2,021 | 1,939 | 2.0 | 2.2 | 1.9 |
| OTHER DIGESTIVE SYSTEM CONDITIONS----- | 21,964 | 10,737 | 11,226 | 11.4 | 11.5 | 11.2 |
| INJURIES----- | 88,651 | 44,432 | 44,220 | 45.8 | 47.7 | 44.1 |
| FRACTURES, DISLOCATIONS, SPRAINS, AND STRAINS----- | 44,882 | 22,573 | 22,309 | 23.2 | 24.2 | 22.3 |
| FRACTURES AND DISLOCATIONS----- | 20,472 | 14,909 | 13,563 | 14.7 | 16.0 | 13.5 |
| SPRAINS AND STRAINS----- | 16,410 | 7,664 | 8,746 | 8.5 | 8.2 | 8.7 |
| OPEN WOUNDS AND LACERATIONS----- | 9,459 | 4,884 | 4,575 | 4.9 | 5.2 | 4.6 |
| CONTUSIONS AND SUPERFICIAL INJURIES----- | 13,456 | 5,302 | 8,154 | 7.0 | 5.7 | 8.1 |
| OTHER CURRENT INJURIES----- | 20,855 | 11,672 | 9,183 | 10.8 | 12.5 | 9.2 |
| ALL OTHER ACUTE CONDITIONS----- | 89,087 | 25,630 | 63,457 | 46.1 | 27.5 | 63.3 |
| DISEASES OF THE EAR----- | 10,685 | 5,228 | 5,457 | 5.5 | 5.6 | 5.4 |
| HEADACHES----- | 2,344 | * | 1,662 | 1.2 | * | 1.7 |
| GENITOURINARY DISORDERS----- | 17,198 | 3,324 | 13,874 | 8.9 | 3.6 | 13.8 |
| DELIVERIES AND DISORDERS OF PREGNANCY AND THE PUERPERIUM---- | 18,183 | *** | 18,183 | 9.4 | .. | 18.1 |
| DISEASES OF THE SKIN----- | 4,582 | * | 3,495 | 2.4 | * | 3.5 |
| DISEASES OF THE MUSCULOSKELETAL SYSTEM----- | 9,490 | 3,093 | 6,396 | 4.9 | 3.3 | 6.4 |
| ALL OTHER ACUTE CONDITIONS----- | 26,606 | 12,217 | 14,389 | 13.8 | 13.1 | 14.4 |

NOTE: N.o.s.—not otherwise specified; n.e.c.—not elsewhere classified.

TABLE 5. DAYS OF RESTRICTED ACTIVITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| SEX AND CONDITION GROUP | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER |
|---------------------------------------|--|---------|---------|---------|-----------|--|---------|-------|-------|-----------|
| <u>BOTH SEXES</u> | DAYS OF RESTRICTED ACTIVITY IN THOUSANDS | | | | | DAYS OF RESTRICTED ACTIVITY PER 100 PERSONS PER YEAR | | | | |
| ALL ACUTE CONDITIONS-- | 1,455,088 | 204,515 | 319,372 | 499,405 | 431,796 | 752.4 | 874.3 | 731.1 | 726.7 | 749.7 |
| INFECTIVE AND PARASITIC DISEASES----- | 177,177 | 39,558 | 69,530 | 41,798 | 26,291 | 91.6 | 169.1 | 159.2 | 60.8 | 45.6 |
| RESPIRATORY CONDITIONS-- | 653,665 | 123,613 | 164,871 | 188,005 | 177,176 | 338.0 | 528.4 | 377.4 | 273.6 | 307.6 |
| UPPER RESPIRATORY CONDITIONS----- | 352,180 | 82,940 | 98,165 | 93,170 | 77,905 | 182.1 | 354.6 | 224.7 | 135.6 | 135.3 |
| INFLUENZA----- | 241,622 | 27,593 | 56,111 | 80,845 | 77,074 | 124.9 | 118.0 | 128.4 | 117.6 | 133.8 |
| OTHER RESPIRATORY CONDITIONS----- | 59,862 | 13,081 | 10,595 | 13,990 | 22,196 | 31.0 | 55.9 | 24.3 | 20.4 | 38.5 |
| DIGESTIVE SYSTEM CONDITIONS----- | 67,964 | 8,518 | 9,466 | 25,330 | 24,650 | 35.1 | 36.4 | 21.7 | 36.9 | 42.8 |
| INJURIES----- | 332,088 | 14,859 | 45,828 | 144,455 | 126,945 | 171.7 | 63.5 | 104.9 | 210.2 | 220.4 |
| ALL OTHER ACUTE CONDITIONS----- | 224,195 | 17,966 | 29,677 | 99,816 | 76,735 | 115.9 | 76.8 | 67.9 | 145.2 | 133.2 |
| <u>MALE</u> | | | | | | | | | | |
| ALL ACUTE CONDITIONS-- | 638,154 | 109,567 | 161,744 | 195,481 | 171,362 | 684.6 | 915.8 | 730.5 | 603.8 | 641.0 |
| INFECTIVE AND PARASITIC DISEASES----- | 85,914 | 21,233 | 36,442 | 17,372 | 10,866 | 92.2 | 177.5 | 164.6 | 53.7 | 40.6 |
| RESPIRATORY CONDITIONS-- | 286,295 | 66,222 | 79,785 | 69,886 | 70,403 | 307.1 | 553.5 | 360.3 | 215.9 | 263.4 |
| UPPER RESPIRATORY CONDITIONS----- | 158,736 | 44,164 | 48,317 | 36,267 | 29,988 | 170.3 | 369.1 | 218.2 | 112.0 | 112.2 |
| INFLUENZA----- | 99,708 | 13,617 | 27,124 | 28,453 | 30,514 | 107.0 | 113.8 | 122.5 | 87.9 | 114.1 |
| OTHER RESPIRATORY CONDITIONS----- | 27,851 | 8,441 | 4,343 | 5,167 | 9,900 | 29.9 | 70.6 | 19.6 | 16.0 | 37.0 |
| DIGESTIVE SYSTEM CONDITIONS----- | 31,251 | 5,499 | 4,070 | 8,895 | 12,787 | 33.5 | 46.0 | 18.4 | 27.5 | 47.8 |
| INJURIES----- | 169,824 | 6,569 | 28,785 | 87,989 | 46,481 | 182.2 | 54.9 | 130.0 | 271.8 | 173.9 |
| ALL OTHER ACUTE CONDITIONS----- | 64,870 | 10,045 | 12,662 | 11,338 | 30,825 | 69.6 | 84.0 | 57.2 | 35.0 | 115.3 |
| <u>FEMALE</u> | | | | | | | | | | |
| ALL ACUTE CONDITIONS-- | 816,934 | 94,948 | 157,628 | 303,924 | 260,434 | 815.4 | 830.8 | 731.6 | 836.0 | 843.8 |
| INFECTIVE AND PARASITIC DISEASES----- | 91,263 | 18,326 | 33,088 | 24,425 | 15,424 | 91.1 | 160.4 | 153.6 | 67.2 | 50.0 |
| RESPIRATORY CONDITIONS-- | 367,370 | 57,392 | 85,086 | 118,119 | 106,773 | 366.7 | 502.2 | 394.9 | 324.9 | 345.9 |
| UPPER RESPIRATORY CONDITIONS----- | 193,444 | 38,776 | 49,847 | 56,903 | 47,917 | 193.1 | 339.3 | 231.4 | 156.5 | 155.2 |
| INFLUENZA----- | 141,915 | 13,976 | 28,987 | 52,392 | 46,560 | 141.6 | 122.3 | 134.5 | 144.1 | 150.8 |
| OTHER RESPIRATORY CONDITIONS----- | 32,011 | 4,640 | 6,252 | 8,824 | 12,296 | 31.9 | 40.6 | 29.0 | 24.3 | 39.8 |
| DIGESTIVE SYSTEM CONDITIONS----- | 36,712 | 3,019 | 5,396 | 16,435 | 11,863 | 36.6 | 26.4 | 25.0 | 45.2 | 38.4 |
| INJURIES----- | 162,264 | 8,291 | 17,043 | 56,466 | 80,464 | 162.0 | 72.5 | 79.1 | 155.3 | 260.7 |
| ALL OTHER ACUTE CONDITIONS----- | 159,325 | 7,922 | 17,015 | 88,478 | 45,910 | 159.0 | 69.3 | 79.0 | 243.4 | 148.7 |

TABLE 6. DAYS OF BED DISABILITY ASSOCIATED WITH ACUTE CONDITIONS AND DAYS OF BED DISABILITY PER 100 PERSON PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| SEX AND CONDITION GROUP | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER | ALL AGES | UNDER 6 | 6-16 | 17-44 | 45 & OVER |
|---------------------------------------|-------------------------------------|---------|---------|---------|-----------|---|---------|-------|-------|-----------|
| <u>BOTH SEXES</u> | DAYS OF BED DISABILITY IN THOUSANDS | | | | | DAYS OF BED DISABILITY PER 100 PERSONS PER YEAR | | | | |
| ALL ACUTE CONDITIONS-- | 611,158 | 84,030 | 144,765 | 213,375 | 168,989 | 316.0 | 359.2 | 331.4 | 310.5 | 293.4 |
| INFECTIVE AND PARASITIC DISEASES----- | 84,496 | 14,851 | 33,309 | 23,780 | 12,556 | 43.7 | 63.5 | 76.2 | 34.6 | 21.8 |
| RESPIRATORY CONDITIONS-- | 315,636 | 51,959 | 86,933 | 97,839 | 78,906 | 163.2 | 222.1 | 199.0 | 142.4 | 137.0 |
| UPPER RESPIRATORY CONDITIONS----- | 149,469 | 29,115 | 48,636 | 44,795 | 26,924 | 77.3 | 124.5 | 111.3 | 65.2 | 46.7 |
| INFLUENZA----- | 132,857 | 13,796 | 32,688 | 47,093 | 39,281 | 68.7 | 59.0 | 74.8 | 68.5 | 68.2 |
| OTHER RESPIRATORY CONDITIONS----- | 33,310 | 9,049 | 5,609 | 5,951 | 12,701 | 17.2 | 38.7 | 12.8 | 8.7 | 22.1 |
| DIGESTIVE SYSTEM CONDITIONS----- | 33,287 | 3,867 | 5,598 | 11,083 | 12,739 | 17.2 | 16.5 | 12.8 | 16.1 | 22.1 |
| INJURIES----- | 88,651 | 5,011 | 8,522 | 37,855 | 37,263 | 45.8 | 21.4 | 19.5 | 55.1 | 64.7 |
| ALL OTHER ACUTE CONDITIONS----- | 89,087 | 8,341 | 10,404 | 42,818 | 27,524 | 46.1 | 35.7 | 23.8 | 62.3 | 47.8 |
| <u>MALE</u> | | | | | | | | | | |
| ALL ACUTE CONDITIONS-- | 264,635 | 44,824 | 70,175 | 79,842 | 69,795 | 283.9 | 374.7 | 316.9 | 246.6 | 261.1 |
| INFECTIVE AND PARASITIC DISEASES----- | 39,792 | 7,412 | 16,975 | 10,356 | 5,049 | 42.7 | 62.0 | 76.7 | 32.0 | 18.9 |
| RESPIRATORY CONDITIONS-- | 138,761 | 28,293 | 42,000 | 37,981 | 30,487 | 148.9 | 236.5 | 189.7 | 117.3 | 114.0 |
| UPPER RESPIRATORY CONDITIONS----- | 67,945 | 15,281 | 24,713 | 18,544 | 9,407 | 72.9 | 127.7 | 111.6 | 57.3 | 35.2 |
| INFLUENZA----- | 55,203 | 6,944 | 14,979 | 17,089 | 16,191 | 59.2 | 58.0 | 67.6 | 52.8 | 60.6 |
| OTHER RESPIRATORY CONDITIONS----- | 15,612 | 6,069 | 2,308 | 2,348 | 4,888 | 16.7 | 50.7 | 10.4 | 7.3 | 18.3 |
| DIGESTIVE SYSTEM CONDITIONS----- | 16,021 | 2,870 | 2,677 | 4,415 | 6,059 | 17.2 | 24.0 | 12.1 | 13.6 | 22.7 |
| INJURIES----- | 44,432 | 2,199 | 4,654 | 22,187 | 15,391 | 47.7 | 18.4 | 21.0 | 68.5 | 57.6 |
| ALL OTHER ACUTE CONDITIONS----- | 25,630 | 4,050 | 3,869 | 4,903 | 12,808 | 27.5 | 33.9 | 17.5 | 15.1 | 47.9 |
| <u>FEMALE</u> | | | | | | | | | | |
| ALL ACUTE CONDITIONS-- | 346,523 | 39,206 | 74,590 | 133,533 | 99,194 | 345.9 | 343.1 | 346.2 | 367.3 | 321.4 |
| INFECTIVE AND PARASITIC DISEASES----- | 44,704 | 7,439 | 16,334 | 13,425 | 7,507 | 44.6 | 65.1 | 75.8 | 36.9 | 24.3 |
| RESPIRATORY CONDITIONS-- | 176,875 | 23,666 | 44,933 | 59,858 | 48,419 | 176.5 | 207.1 | 208.6 | 164.7 | 156.9 |
| UPPER RESPIRATORY CONDITIONS----- | 81,524 | 13,834 | 23,923 | 26,251 | 17,516 | 81.4 | 121.1 | 111.0 | 72.2 | 56.7 |
| INFLUENZA----- | 77,654 | 6,852 | 17,708 | 30,003 | 23,090 | 77.5 | 60.0 | 82.2 | 82.5 | 74.8 |
| OTHER RESPIRATORY CONDITIONS----- | 17,697 | 2,980 | 3,301 | 3,604 | 7,812 | 17.7 | 26.1 | 15.3 | 9.9 | 25.3 |
| DIGESTIVE SYSTEM CONDITIONS----- | 17,266 | * | 2,921 | 6,668 | 6,680 | 17.2 | * | 13.6 | 18.3 | 21.6 |
| INJURIES----- | 44,220 | 2,812 | 3,867 | 15,669 | 21,672 | 44.1 | 24.6 | 17.9 | 43.1 | 70.9 |
| ALL OTHER ACUTE CONDITIONS----- | 63,457 | 4,291 | 6,535 | 37,915 | 14,716 | 63.3 | 37.5 | 30.3 | 104.3 | 47.7 |

TABLE 7. DAYS LOST FROM SCHOOL ASSOCIATED WITH ACUTE CONDITIONS AND DAYS LOST FROM SCHOOL PER 100 CHILDREN 6-16 YEARS OF AGE PER YEAR, BY SEX AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| CONDITION GROUP | BOTH SEXES | | BOTH SEXES | | BOTH SEXES | |
|---------------------------------------|------------------------------------|--------|------------|---|------------|--------|
| | MALE | FEMALE | MALE | FEMALE | MALE | FEMALE |
| | DAYS LOST FROM SCHOOL IN THOUSANDS | | | DAYS LOST FROM SCHOOL PER 100 CHILDREN PER YEAR | | |
| ALL ACUTE CONDITIONS----- | 171,275 | 85,477 | 85,798 | 392.1 | 386.0 | 398.2 |
| INFECTIVE AND PARASITIC DISEASES----- | 41,665 | 22,445 | 19,220 | 95.4 | 101.4 | 89.2 |
| RESPIRATORY CONDITIONS----- | 100,394 | 49,057 | 51,337 | 229.8 | 221.6 | 238.3 |
| UPPER RESPIRATORY CONDITIONS----- | 61,378 | 30,383 | 30,995 | 143.5 | 137.2 | 143.9 |
| INFLUENZA----- | 34,293 | 16,651 | 17,642 | 78.5 | 75.2 | 81.9 |
| OTHER RESPIRATORY CONDITIONS----- | 4,723 | 1,993 | 2,730 | 10.8 | 9.1 | 12.5 |
| DIGESTIVE SYSTEM CONDITIONS----- | 5,282 | 2,522 | 2,760 | 12.1 | 11.4 | 12.8 |
| INJURIES----- | 9,821 | 5,796 | 4,025 | 22.5 | 26.2 | 18.7 |
| ALL OTHER ACUTE CONDITIONS----- | 14,113 | 5,656 | 8,456 | 32.3 | 25.5 | 39.2 |

TABLE 8. DAYS LOST FROM WORK ASSOCIATED WITH ACUTE CONDITIONS AND DAYS LOST FROM WORK PER 100 CURRENTLY EMPLOYED PERSONS PER YEAR, BY AGE, SEX, AND CONDITION GROUP: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| SEX AND CONDITION GROUP | ALL AGES- 17 & OVER | 17-44 | 45 & OVER | ALL AGES 17 & OVER | 17-44 | 45 & OVER |
|---------------------------------------|-------------------------------------|---------|--------------|---|-------|--------------|
| <u>BOTH SEXES</u> | DAYS LOST FROM WORK IN THOUSANDS | | | DAYS LOST FROM WORK PER 100 CURRENTLY EMPLOYED PERSONS PER YEAR | | |
| ALL ACUTE CONDITIONS----- | 258,791 | 160,267 | 98,524 | 343.9 | 254.8 | 327.5 |
| INFECTIVE AND PARASITIC DISEASES----- | 20,957 | 14,658 | 6,299 | 27.8 | 32.4 | 20.9 |
| RESPIRATORY CONDITIONS----- | 102,740 | 58,575 | 44,165 | 136.5 | 129.7 | 146.8 |
| UPPER RESPIRATORY CONDITIONS----- | 46,189 | 28,535 | 17,655 | 61.4 | 63.2 | 58.7 |
| INFLUENZA----- | 47,013 | 26,777 | 20,236 | 62.5 | 59.3 | 67.3 |
| OTHER RESPIRATORY CONDITIONS----- | 9,538 | 3,264 | 6,274 | 12.7 | 7.2 | 20.9 |
| DIGESTIVE SYSTEM CONDITIONS----- | 13,385 | 7,801 | 5,585 | 17.8 | 17.3 | 18.6 |
| INJURIES----- | 83,706 | 55,630 | 28,076 | 111.2 | 123.1 | 93.3 |
| ALL OTHER ACUTE CONDITIONS----- | 38,003 | 23,604 | 14,398 | 50.5 | 52.3 | 47.9 |
| <u>MALE</u> | | | | | | |
| ALL ACUTE CONDITIONS----- | 156,602 | 93,911 | 62,692 | 326.6 | 329.4 | 327.4 |
| INFECTIVE AND PARASITIC DISEASES----- | 14,035 | 9,506 | 4,529 | 29.5 | 33.3 | 23.7 |
| RESPIRATORY CONDITIONS----- | 61,905 | 33,586 | 28,319 | 129.9 | 117.8 | 147.9 |
| UPPER RESPIRATORY CONDITIONS----- | 26,567 | 16,144 | 10,423 | 55.7 | 56.6 | 54.4 |
| INFLUENZA----- | 29,231 | 15,400 | 13,832 | 61.3 | 54.0 | 72.2 |
| OTHER RESPIRATORY CONDITIONS----- | 6,106 | 2,042 | 4,065 | 12.8 | 7.2 | 21.2 |
| DIGESTIVE SYSTEM CONDITIONS----- | 8,388 | 3,564 | 4,824 | 17.6 | 12.5 | 25.2 |
| INJURIES----- | 56,676 | 40,830 | 15,846 | 118.9 | 143.2 | 82.8 |
| ALL OTHER ACUTE CONDITIONS----- | 15,598 | 6,426 | 9,172 | 32.7 | 22.5 | 47.9 |
| <u>FEMALE</u> | | | | | | |
| ALL ACUTE CONDITIONS----- | 102,189 | 66,357 | 35,832 | 370.2 | 398.1 | 327.8 |
| INFECTIVE AND PARASITIC DISEASES----- | 6,922 | 5,152 | 1,770 | 25.1 | 30.9 | 16.2 |
| RESPIRATORY CONDITIONS----- | 40,835 | 24,989 | 15,846 | 147.9 | 149.9 | 145.0 |
| UPPER RESPIRATORY CONDITIONS----- | 19,622 | 12,350 | 7,232 | 71.1 | 74.3 | 66.2 |
| INFLUENZA----- | 17,781 | 11,377 | 6,404 | 64.4 | 68.3 | 58.6 |
| OTHER RESPIRATORY CONDITIONS----- | 3,432 | * | 2,210 | 12.4 | * | 20.2 |
| DIGESTIVE SYSTEM CONDITIONS----- | 4,997 | 4,237 | * | 18.1 | 25.4 | * |
| INJURIES----- | 27,030 | 14,799 | 12,231 | 97.9 | 88.8 | 111.9 |
| ALL OTHER ACUTE CONDITIONS----- | 22,404 | 17,179 | 5,226 | 81.2 | 103.1 | 47.8 |

Table 9. Number and percent distribution of persons with limitation of activity due to chronic conditions, by degree of limitation according to sex and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

| Sex and age | Total population | With activity limitation | With limitation in major activity ¹ | With no activity limitation | Total population | With activity limitation | With limitation in major activity ¹ | With no activity limitation |
|---------------------|---------------------|--------------------------|--|-----------------------------|----------------------|--------------------------|--|-----------------------------|
| <u>Both sexes</u> | Number in thousands | | | | Percent distribution | | | |
| All ages----- | 193,403 | 22,248 | 16,805 | 171,155 | 100.0 | 11.5 | 8.7 | 88.5 |
| Under 17 years----- | 67,078 | 1,418 | 712 | 65,660 | 100.0 | 2.1 | 1.1 | 97.9 |
| 17-44 years----- | 68,726 | 4,994 | 3,245 | 63,732 | 100.0 | 7.3 | 4.7 | 92.7 |
| 45-64 years----- | 39,570 | 7,493 | 5,637 | 32,077 | 100.0 | 18.9 | 14.2 | 81.1 |
| 65+ years----- | 18,029 | 8,343 | 7,212 | 9,685 | 100.0 | 46.3 | 40.0 | 53.7 |
| <u>Male</u> | | | | | | | | |
| All ages----- | 93,212 | 11,372 | 9,098 | 81,839 | 100.0 | 12.2 | 9.8 | 87.8 |
| Under 17 years----- | 34,106 | 789 | 384 | 33,316 | 100.0 | 2.3 | 1.1 | 97.7 |
| 17-44 years----- | 32,373 | 2,537 | 1,787 | 29,837 | 100.0 | 7.8 | 5.5 | 92.2 |
| 45-64 years----- | 18,924 | 3,894 | 3,113 | 15,030 | 100.0 | 20.6 | 16.5 | 79.4 |
| 65+ years----- | 7,809 | 4,153 | 3,814 | 3,656 | 100.0 | 53.2 | 48.8 | 46.8 |
| <u>Female</u> | | | | | | | | |
| All ages----- | 100,191 | 10,876 | 7,707 | 89,315 | 100.0 | 10.9 | 7.7 | 89.1 |
| Under 17 years----- | 32,972 | 629 | 328 | 32,343 | 100.0 | 1.9 | 1.0 | 98.1 |
| 17-44 years----- | 36,353 | 2,457 | 1,458 | 33,896 | 100.0 | 6.8 | 4.0 | 93.2 |
| 45-64 years----- | 20,647 | 3,599 | 2,523 | 17,047 | 100.0 | 17.4 | 12.2 | 82.6 |
| 65+ years----- | 10,219 | 4,190 | 3,398 | 6,029 | 100.0 | 41.0 | 33.3 | 59.0 |

¹Major activity refers to ability to work, keep house, or engage in school or preschool activities.

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25, and P-60.

Table 10. Number of persons injured and number of persons injured per 100 persons per year, by class of accident, sex, and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | Total | Class of accident | | | | |
|------------------------|--------|--|---------|---------------|--------|--------|
| | | Moving motor vehicle | | While at work | Home | Other |
| | | Total | Traffic | | | |
| <u>Both sexes</u> | | Number of persons injured in thousands | | | | |
| All ages----- | 52,967 | 3,780 | 3,628 | 9,203 | 23,012 | 18,607 |
| Under 6 years----- | 8,852 | * | * | ... | 6,048 | 2,557 |
| 6-16 years----- | 12,863 | * | * | ... | 5,117 | 7,514 |
| 17-44 years----- | 19,832 | 2,427 | 2,355 | 5,971 | 6,792 | 5,554 |
| 45-64 years----- | 8,610 | * | * | 3,006 | 3,125 | 2,436 |
| 65 years and over----- | 2,810 | * | * | * | 1,929 | * |
| <u>Male</u> | | Number of persons injured in thousands | | | | |
| All ages----- | 30,465 | 1,578 | 1,545 | 8,032 | 10,378 | 11,772 |
| Under 6 years----- | 5,229 | * | * | ... | 3,509 | 1,581 |
| 6-16 years----- | 8,283 | * | * | ... | 2,890 | 5,330 |
| 17-44 years----- | 11,494 | 1,085 | 1,085 | 5,477 | 2,427 | 3,352 |
| 45-64 years----- | 4,338 | * | * | 2,368 | 909 | 1,213 |
| 65 years and over----- | 1,121 | * | * | * | * | * |
| <u>Female</u> | | Number of persons injured in thousands | | | | |
| All ages----- | 22,502 | 2,202 | 2,084 | 1,171 | 12,633 | 6,835 |
| Under 6 years----- | 3,623 | * | * | ... | 2,540 | 977 |
| 6-16 years----- | 4,580 | * | * | ... | 2,227 | 2,184 |
| 17-44 years----- | 8,339 | 1,342 | 1,269 | * | 4,366 | 2,201 |
| 45-64 years----- | 4,272 | * | * | * | 2,216 | 1,223 |
| 65 years and over----- | 1,689 | * | * | * | 1,286 | * |
| <u>Both sexes</u> | | Number of persons injured per 100 persons per year | | | | |
| All ages----- | 27.4 | 2.0 | 1.9 | 4.8 | 11.9 | 9.6 |
| Under 6 years----- | 37.8 | * | * | ... | 25.9 | 10.9 |
| 6-16 years----- | 29.4 | * | * | ... | 11.7 | 17.2 |
| 17-44 years----- | 28.9 | 3.5 | 3.4 | 8.7 | 9.9 | 8.1 |
| 45-64 years----- | 21.8 | * | * | 7.6 | 7.9 | 6.2 |
| 65 years and over----- | 15.6 | * | * | * | 10.7 | * |
| <u>Male</u> | | Number of persons injured per 100 persons per year | | | | |
| All ages----- | 32.7 | 1.7 | 1.7 | 8.6 | 11.1 | 12.6 |
| Under 6 years----- | 43.7 | * | * | ... | 29.3 | 13.2 |
| 6-16 years----- | 37.4 | * | * | ... | 13.1 | 24.1 |
| 17-44 years----- | 35.5 | 3.4 | 3.4 | 16.9 | 7.5 | 10.4 |
| 45-64 years----- | 22.9 | * | * | 12.5 | 4.8 | 6.4 |
| 65 years and over----- | 14.4 | * | * | * | * | * |
| <u>Female</u> | | Number of persons injured per 100 persons per year | | | | |
| All ages----- | 22.5 | 2.2 | 2.1 | 1.2 | 12.6 | 6.8 |
| Under 6 years----- | 31.7 | * | * | ... | 22.2 | 8.5 |
| 6-16 years----- | 21.3 | * | * | ... | 10.3 | 10.1 |
| 17-44 years----- | 22.9 | 3.7 | 3.5 | * | 12.0 | 6.1 |
| 45-64 years----- | 20.7 | * | * | * | 10.7 | 5.9 |
| 65 years and over----- | 16.5 | * | * | * | 12.6 | * |

NOTE: Excluded from these statistics are all conditions involving neither restricted activity nor medical attention. The sum of data for the four classes of accidents may be greater than the total because the classes are not mutually exclusive.

Table 11. Days of restricted activity associated with injury¹ and days of restricted activity per 100 persons per year, by class of accident, sex, and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

| Sex and age | Total | Class of accident | | | | |
|------------------------|---------|--|---------|---------------|---------|---------|
| | | Moving motor vehicle | | While at work | Home | Other |
| | | Total | Traffic | | | |
| <u>Both sexes</u> | | Days of restricted activity in thousands | | | | |
| All ages----- | 552,118 | 120,118 | 112,953 | 143,389 | 169,585 | 150,724 |
| Under 6 years----- | 12,864 | 2,741 | 2,176 | ... | 6,167 | 4,521 |
| 6-16 years----- | 49,511 | 4,655 | 4,551 | ... | 16,098 | 28,758 |
| 17-44 years----- | 213,571 | 61,734 | 59,180 | 72,265 | 44,694 | 50,218 |
| 45-64 years----- | 166,040 | 33,501 | 31,072 | 58,393 | 48,825 | 35,927 |
| 65 years and over----- | 110,132 | 17,488 | 15,975 | 12,731 | 53,801 | 31,300 |
| <u>Male</u> | | | | | | |
| All ages----- | 281,524 | 55,065 | 52,092 | 118,241 | 44,942 | 87,021 |
| Under 6 years----- | 6,569 | * | * | ... | 3,074 | 3,359 |
| 6-16 years----- | 31,777 | 2,956 | 2,853 | ... | 9,818 | 19,003 |
| 17-44 years----- | 123,458 | 30,986 | 29,992 | 61,210 | 11,837 | 32,106 |
| 45-64 years----- | 82,755 | 11,957 | 11,228 | 45,947 | 9,469 | 22,067 |
| 65 years and over----- | 36,964 | 9,032 | 7,884 | 11,084 | 10,744 | 10,485 |
| <u>Female</u> | | | | | | |
| All ages----- | 270,594 | 65,053 | 60,862 | 25,148 | 124,642 | 63,703 |
| Under 6 years----- | 6,296 | 2,606 | 2,041 | ... | 3,093 | * |
| 6-16 years----- | 17,733 | 1,699 | 1,699 | ... | 6,279 | 9,755 |
| 17-44 years----- | 90,113 | 30,748 | 29,188 | 11,055 | 32,858 | 18,112 |
| 45-64 years----- | 83,284 | 21,544 | 19,844 | 12,445 | 39,355 | 13,860 |
| 65 years and over----- | 73,168 | 8,456 | 8,091 | 1,648 | 43,057 | 20,814 |
| <u>Both sexes</u> | | Days of restricted activity per 100 persons per year | | | | |
| All ages----- | 285.5 | 62.1 | 58.4 | 74.1 | 87.7 | 77.9 |
| Under 6 years----- | 55.0 | 11.7 | 9.3 | ... | 26.4 | 19.3 |
| 6-16 years----- | 113.3 | 10.7 | 10.4 | ... | 36.8 | 65.8 |
| 17-44 years----- | 310.8 | 89.8 | 86.1 | 105.1 | 65.0 | 73.1 |
| 45-64 years----- | 419.6 | 84.7 | 78.5 | 147.6 | 123.4 | 90.8 |
| 65 years and over----- | 610.9 | 97.0 | 88.6 | 70.6 | 298.4 | 173.6 |
| <u>Male</u> | | | | | | |
| All ages----- | 302.0 | 59.1 | 55.9 | 126.9 | 48.2 | 93.4 |
| Under 6 years----- | 54.9 | * | * | ... | 25.7 | 28.1 |
| 6-16 years----- | 143.5 | 13.4 | 12.9 | ... | 44.3 | 85.8 |
| 17-44 years----- | 381.4 | 95.7 | 92.6 | 189.1 | 36.6 | 99.2 |
| 45-64 years----- | 437.3 | 63.2 | 59.3 | 242.8 | 50.0 | 116.6 |
| 65 years and over----- | 473.4 | 115.7 | 101.0 | 141.9 | 137.6 | 134.3 |
| <u>Female</u> | | | | | | |
| All ages----- | 270.1 | 64.9 | 60.7 | 25.1 | 124.4 | 63.6 |
| Under 6 years----- | 55.1 | 22.8 | 17.9 | ... | 27.1 | * |
| 6-16 years----- | 82.3 | 7.9 | 7.9 | ... | 29.1 | 45.3 |
| 17-44 years----- | 247.9 | 84.6 | 80.3 | 30.4 | 90.4 | 49.8 |
| 45-64 years----- | 403.4 | 104.3 | 96.1 | 60.3 | 190.6 | 67.1 |
| 65 years and over----- | 716.0 | 82.7 | 79.2 | 16.1 | 421.3 | 203.7 |

¹Includes disability days associated with current injuries and impairments due to injury.

NOTE: The sum of data for the four classes of accidents may be greater than the total because the classes are not mutually exclusive.

Table 12. Days of bed disability associated with injury¹ and days of bed disability per 100 persons per year, by class of accident, sex, and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | Total | Class of accident | | | | |
|------------------------|---------|---|---------|---------------|--------|--------|
| | | Moving motor vehicle | | While at work | Home | Other |
| | | Total | Traffic | | | |
| <u>Both sexes</u> | | Days of bed disability in thousands | | | | |
| All ages----- | 140,135 | 33,834 | 32,448 | 33,943 | 40,378 | 40,046 |
| Under 6 years----- | 4,239 | * | * | ... | 1,924 | 1,767 |
| 6-16 years----- | 8,943 | 1,575 | * | ... | 2,116 | 5,252 |
| 17-44 years----- | 54,244 | 15,680 | 15,302 | 19,980 | 9,830 | 12,188 |
| 45-64 years----- | 41,548 | 9,854 | 9,744 | 12,654 | 11,143 | 11,589 |
| 65 years and over----- | 31,162 | 5,612 | 5,384 | * | 15,365 | 9,250 |
| <u>Male</u> | | Days of bed disability in thousands | | | | |
| All ages----- | 69,597 | 13,458 | 13,355 | 27,272 | 9,723 | 23,562 |
| Under 6 years----- | 2,199 | * | * | ... | * | 1,520 |
| 6-16 years----- | 5,125 | * | * | ... | * | 3,441 |
| 17-44 years----- | 30,502 | 6,214 | 6,214 | 16,613 | 2,087 | 8,281 |
| 45-64 years----- | 19,717 | 3,626 | 3,626 | 9,351 | * | 7,074 |
| 65 years and over----- | 12,054 | 2,977 | 2,977 | * | 4,668 | 3,246 |
| <u>Female</u> | | Days of bed disability in thousands | | | | |
| All ages----- | 70,538 | 20,376 | 19,094 | 6,671 | 30,655 | 16,484 |
| Under 6 years----- | 2,039 | * | * | ... | * | * |
| 6-16 years----- | 3,818 | * | * | ... | * | 1,811 |
| 17-44 years----- | 23,741 | 9,466 | 9,088 | 3,368 | 7,743 | 3,906 |
| 45-64 years----- | 21,832 | 6,228 | 6,118 | 3,303 | 9,898 | 4,515 |
| 65 years and over----- | 19,108 | 2,635 | 2,407 | * | 10,697 | 6,004 |
| <u>Both sexes</u> | | Days of bed disability per 100 persons per year | | | | |
| All ages----- | 72.5 | 17.5 | 16.8 | 17.6 | 20.9 | 20.7 |
| Under 6 years----- | 18.1 | * | * | ... | 8.2 | 7.6 |
| 6-16 years----- | 20.5 | 3.6 | * | ... | 4.8 | 12.0 |
| 17-44 years----- | 78.9 | 22.8 | 22.3 | 29.1 | 14.3 | 17.7 |
| 45-64 years----- | 105.0 | 24.9 | 24.6 | 32.0 | 28.2 | 29.3 |
| 65 years and over----- | 172.8 | 31.1 | 29.9 | * | 85.2 | 51.3 |
| <u>Male</u> | | Days of bed disability per 100 persons per year | | | | |
| All ages----- | 74.7 | 14.4 | 14.3 | 29.3 | 10.4 | 25.3 |
| Under 6 years----- | 18.4 | * | * | ... | * | 12.7 |
| 6-16 years----- | 23.1 | * | * | ... | * | 15.5 |
| 17-44 years----- | 94.2 | 19.2 | 19.2 | 51.3 | 6.4 | 25.6 |
| 45-64 years----- | 104.2 | 19.2 | 19.2 | 49.4 | * | 37.4 |
| 65 years and over----- | 154.4 | 38.1 | 38.1 | * | 59.8 | 41.6 |
| <u>Female</u> | | Days of bed disability per 100 persons per year | | | | |
| All ages----- | 70.4 | 20.3 | 19.1 | 6.7 | 30.6 | 16.5 |
| Under 6 years----- | 17.8 | * | * | ... | * | * |
| 6-16 years----- | 17.7 | * | * | ... | * | 8.4 |
| 17-44 years----- | 65.3 | 26.0 | 25.0 | 9.3 | 21.3 | 10.7 |
| 45-64 years----- | 105.7 | 30.2 | 29.6 | 16.0 | 47.9 | 21.9 |
| 65 years and over----- | 187.0 | 25.8 | 23.6 | * | 104.7 | 58.8 |

¹Includes disability days associated with current injuries and impairments due to injury.

NOTE: The sum of data for the four classes of accidents may be greater than the total because the classes are not mutually exclusive.

TABLE 13. NUMBER OF DISCHARGES FROM SHORT-STAY HOSPITALS, NUMBER OF DISCHARGES PER 100 PERSONS PER YEAR, NUMBER OF HOSPITAL DAYS, AND AVERAGE LENGTH OF STAY, BY SEX AND AGE: UNITED STATES, BASED ON DATA COLLECTED IN HEALTH INTERVIEWS IN 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| AGE | BOTH SEXES | MALE | FEMALE | BOTH SEXES | MALE | FEMALE |
|----------------------|--------------------------------------|--------|---------|---|------|--------|
| | NUMBER OF DISCHARGES IN THOUSANDS | | | NUMBER OF DISCHARGES PER 100 PERSONS PER YEAR | | |
| ALL AGES----- | 23,756 | 9,479 | 14,278 | 12.3 | 10.2 | 14.3 |
| UNDER 17 YEARS----- | 4,349 | 2,460 | 1,888 | 6.5 | 7.2 | 5.7 |
| 17-24 YEARS----- | 3,811 | 832 | 2,978 | 16.3 | 7.8 | 23.6 |
| 25-34 YEARS----- | 3,455 | 791 | 2,665 | 15.7 | 7.5 | 23.0 |
| 35-44 YEARS----- | 2,986 | 1,127 | 1,858 | 12.6 | 10.1 | 15.3 |
| 45-64 YEARS----- | 5,614 | 2,598 | 3,016 | 14.2 | 13.7 | 14.6 |
| 65 & OVER YEARS----- | 3,543 | 1,670 | 1,873 | 19.7 | 21.4 | 18.3 |
| | NUMBER OF HOSPITAL DAYS IN THOUSANDS | | | AVERAGE LENGTH OF STAY | | |
| ALL AGES----- | 201,861 | 96,981 | 104,879 | 8.5 | 10.2 | 7.3 |
| UNDER 17 YEARS----- | 23,875 | 13,800 | 10,075 | 5.5 | 5.6 | 5.3 |
| 17-24 YEARS----- | 20,793 | 7,649 | 13,144 | 5.5 | 5.2 | 4.4 |
| 25-34 YEARS----- | 20,932 | 5,246 | 15,686 | 6.1 | 6.6 | 5.9 |
| 35-44 YEARS----- | 25,639 | 12,702 | 12,937 | 8.6 | 11.3 | 7.0 |
| 45-64 YEARS----- | 62,759 | 34,294 | 28,465 | 11.2 | 13.2 | 9.4 |
| 65 & OVER YEARS----- | 47,862 | 23,290 | 24,572 | 13.5 | 13.9 | 13.1 |

NOTE: These statistics are based on data collected in health interviews. They will differ from those reported by the Hospital Discharge Survey because of differences in population covered and types of hospitals included.

Table 14. Population, number, and percent distribution of persons with short-stay hospital episodes, by number of episodes according to sex and age: United States, based on data collected in health interviews in 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | Population | Number of hospital episodes | | | | Population | Number of hospital episodes | | | |
|---------------------|------------|--------------------------------|--------|-------|-----|----------------------|-----------------------------|------|-----|-----|
| | | None | 1 | 2 | 3+ | | None | 1 | 2 | 3+ |
| <u>Both sexes</u> | | Number of persons in thousands | | | | Percent distribution | | | | |
| All ages----- | 193,403 | 174,458 | 16,184 | 2,174 | 586 | 100.0 | 90.2 | 8.4 | 1.1 | 0.3 |
| Under 17 years----- | 67,078 | 63,524 | 3,191 | 300 | 63 | 100.0 | 94.7 | 4.8 | 0.4 | 0.1 |
| 17-24 years----- | 23,344 | 20,216 | 2,762 | 308 | 58 | 100.0 | 86.6 | 11.8 | 1.3 | 0.2 |
| 25-34 years----- | 22,062 | 19,057 | 2,622 | 310 | 73 | 100.0 | 86.4 | 11.9 | 1.4 | 0.3 |
| 35-44 years----- | 23,319 | 20,880 | 2,062 | 289 | 88 | 100.0 | 89.5 | 8.8 | 1.2 | 0.4 |
| 45-64 years----- | 39,570 | 35,334 | 3,485 | 577 | 175 | 100.0 | 89.3 | 8.8 | 1.5 | 0.4 |
| 65+ years----- | 18,029 | 15,447 | 2,062 | 390 | 129 | 100.0 | 85.7 | 11.4 | 2.2 | 0.7 |
| <u>Male</u> | | | | | | | | | | |
| All ages----- | 93,212 | 85,854 | 6,216 | 885 | 257 | 100.0 | 92.1 | 6.7 | 0.9 | 0.3 |
| Under 17 years----- | 34,106 | 32,108 | 1,788 | 170 | * | 100.0 | 94.1 | 5.2 | 0.5 | * |
| 17-24 years----- | 10,712 | 10,031 | 598 | 70 | * | 100.0 | 93.6 | 5.6 | 0.7 | * |
| 25-34 years----- | 10,498 | 9,871 | 534 | 82 | * | 100.0 | 94.0 | 5.1 | 0.8 | * |
| 35-44 years----- | 11,163 | 10,281 | 725 | 115 | * | 100.0 | 92.1 | 6.5 | 1.0 | * |
| 45-64 years----- | 18,924 | 16,954 | 1,639 | 240 | 90 | 100.0 | 89.6 | 8.7 | 1.3 | 0.5 |
| 65+ years----- | 7,809 | 6,609 | 932 | 208 | 61 | 100.0 | 84.6 | 11.9 | 2.7 | 0.8 |
| <u>Female</u> | | | | | | | | | | |
| All ages----- | 100,191 | 88,604 | 9,968 | 1,290 | 329 | 100.0 | 88.4 | 9.9 | 1.3 | 0.3 |
| Under 17 years----- | 32,972 | 31,416 | 1,403 | 130 | * | 100.0 | 95.3 | 4.3 | 0.4 | * |
| 17-24 years----- | 12,632 | 10,184 | 2,164 | 238 | * | 100.0 | 80.6 | 17.1 | 1.9 | * |
| 25-34 years----- | 11,565 | 9,186 | 2,089 | 229 | 61 | 100.0 | 79.4 | 18.1 | 2.0 | 0.5 |
| 35-44 years----- | 12,156 | 10,600 | 1,337 | 174 | * | 100.0 | 87.2 | 11.0 | 1.4 | * |
| 45-64 years----- | 20,647 | 18,380 | 1,845 | 336 | 85 | 100.0 | 89.0 | 8.9 | 1.6 | 0.4 |
| 65+ years----- | 10,219 | 8,838 | 1,131 | 182 | 68 | 100.0 | 86.5 | 11.1 | 1.8 | 0.7 |

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25, and P-60.

Table 15. Number of short-stay hospital days and number of days per person with 1+ episodes, by number of episodes, sex, and age: United States, based on data collected in health interviews in 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | Number of hospital episodes | | | | | | | |
|---------------------|-----------------------------|---------|--------|--------|-------------------------------|------|------|------|
| | All episodes | 1 | 2 | 3+ | All episodes | 1 | 2 | 3+ |
| <u>Both sexes</u> | Hospital days in thousands | | | | Days per person with episodes | | | |
| All ages----- | 186,937 | 124,235 | 42,039 | 20,663 | 9.9 | 7.7 | 19.3 | 35.3 |
| Under 17 years----- | 22,524 | 16,725 | 4,159 | 1,641 | 6.3 | 5.2 | 13.9 | 26.0 |
| 17-24 years----- | 19,041 | 13,992 | 3,978 | 1,072 | 6.1 | 5.1 | 12.9 | 18.5 |
| 25-34 years----- | 20,887 | 14,393 | 4,268 | 2,227 | 7.0 | 5.5 | 13.8 | 30.5 |
| 35-44 years----- | 24,869 | 16,156 | 5,977 | 2,736 | 10.2 | 7.8 | 20.7 | 31.1 |
| 45-64 years----- | 56,003 | 36,473 | 12,664 | 6,866 | 13.2 | 10.5 | 21.9 | 39.2 |
| 65+ years----- | 43,612 | 26,497 | 10,993 | 6,122 | 16.9 | 12.9 | 28.2 | 47.5 |
| <u>Male</u> | | | | | | | | |
| All ages----- | 88,555 | 56,909 | 20,984 | 10,663 | 12.0 | 9.2 | 23.7 | 41.5 |
| Under 17 years----- | 13,049 | 9,364 | 2,674 | 1,011 | 6.5 | 5.2 | 15.7 | * |
| 17-24 years----- | 6,317 | 4,483 | 1,543 | 291 | 9.3 | 7.5 | 22.0 | * |
| 25-34 years----- | 5,642 | 3,724 | 1,377 | 540 | 9.0 | 7.0 | 16.8 | * |
| 35-44 years----- | 11,900 | 7,149 | 3,238 | 1,512 | 13.5 | 9.9 | 28.2 | * |
| 45-64 years----- | 29,999 | 19,878 | 5,979 | 4,143 | 15.2 | 12.1 | 24.9 | 46.0 |
| 65+ years----- | 21,648 | 12,310 | 6,172 | 3,165 | 18.0 | 13.2 | 29.7 | 51.9 |
| <u>Female</u> | | | | | | | | |
| All ages----- | 98,382 | 67,327 | 21,055 | 10,000 | 8.5 | 6.8 | 16.3 | 30.4 |
| Under 17 years----- | 9,475 | 7,361 | 1,485 | 629 | 6.1 | 5.2 | 11.4 | * |
| 17-24 years----- | 12,724 | 9,508 | 2,435 | 780 | 5.2 | 4.4 | 10.2 | * |
| 25-34 years----- | 15,246 | 10,669 | 2,890 | 1,687 | 6.4 | 5.1 | 12.6 | 27.7 |
| 35-44 years----- | 12,968 | 9,006 | 2,739 | 1,223 | 8.3 | 6.7 | 15.7 | * |
| 45-64 years----- | 26,004 | 16,596 | 6,685 | 2,724 | 11.5 | 9.0 | 19.9 | 32.0 |
| 65+ years----- | 21,965 | 14,187 | 4,821 | 2,956 | 15.9 | 12.5 | 26.5 | 43.5 |

TABLE 16. DAYS OF DISABILITY AND DAYS OF DISABILITY PER PERSON PER YEAR, BY SEX AND AGE: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| SEX AND AGE | RESTRICTED- ACTIVITY DAYS | BEC- DISABILITY DAYS | WORK-LOSS DAYS ¹ |
|--|---------------------------------|----------------------------|--------------------------------|
| <u>BOTH SEXES</u> | | | |
| DAYS OF DISABILITY IN THOUSANDS | | | |
| ALL AGES----- | 2,953,202 | 1,109,428 | 406,005 |
| UNDER 17 YEARS----- | 617,567 | 270,892 | *** |
| 17-24 YEARS----- | 231,201 | 100,551 | 59,142 |
| 25-44 YEARS----- | 627,374 | 232,125 | 154,522 |
| 45-64 YEARS----- | 831,531 | 282,447 | 170,043 |
| 65 & OVER YEARS----- | 645,529 | 223,413 | 22,298 |
| <u>MALE</u> | | | |
| ALL AGES----- | 1,296,362 | 464,461 | 251,652 |
| UNDER 17 YEARS----- | 322,351 | 135,529 | *** |
| 17-24 YEARS----- | 89,337 | 35,399 | 30,937 |
| 25-44 YEARS----- | 236,338 | 85,939 | 92,199 |
| 45-64 YEARS----- | 390,735 | 126,285 | 113,303 |
| 65 & OVER YEARS----- | 257,600 | 81,309 | 15,213 |
| <u>FEMALE</u> | | | |
| ALL AGES----- | 1,656,840 | 644,967 | 154,353 |
| UNDER 17 YEARS----- | 295,215 | 135,363 | *** |
| 17-24 YEARS----- | 141,864 | 65,151 | 28,205 |
| 25-44 YEARS----- | 391,036 | 146,186 | 62,323 |
| 45-64 YEARS----- | 440,796 | 156,163 | 56,740 |
| 65 & OVER YEARS----- | 387,929 | 142,104 | 7,085 |
| <u>BOTH SEXES</u> | | | |
| DAYS OF DISABILITY PER PERSON PER YEAR | | | |
| ALL AGES----- | 15.3 | 5.7 | 5.4 |
| UNDER 17 YEARS----- | 9.2 | 4.0 | .. |
| 17-24 YEARS----- | 9.9 | 4.3 | 4.2 |
| 25-44 YEARS----- | 13.8 | 5.1 | 5.0 |
| 45-64 YEARS----- | 21.1 | 7.1 | 6.4 |
| 65 & OVER YEARS----- | 35.8 | 12.4 | 6.7 |
| <u>MALE</u> | | | |
| ALL AGES----- | 13.9 | 5.0 | 5.3 |
| UNDER 17 YEARS----- | 9.5 | 4.0 | .. |
| 17-24 YEARS----- | 8.3 | 3.3 | 4.0 |
| 25-44 YEARS----- | 10.9 | 4.0 | 4.5 |
| 45-64 YEARS----- | 20.6 | 6.7 | 6.7 |
| 65 & OVER YEARS----- | 33.0 | 10.4 | 6.9 |
| <u>FEMALE</u> | | | |
| ALL AGES----- | 16.5 | 6.4 | 5.6 |
| UNDER 17 YEARS----- | 9.0 | 4.1 | .. |
| 17-24 YEARS----- | 11.2 | 5.2 | 4.6 |
| 25-44 YEARS----- | 16.5 | 6.2 | 5.9 |
| 45-64 YEARS----- | 21.3 | 7.6 | 5.8 |
| 65 & OVER YEARS----- | 38.0 | 13.9 | 6.4 |

¹Work loss reported for currently employed persons aged 17 years and over.

TABLE 17. DAYS LOST FROM SCHOOL AND DAYS LOST FROM SCHOOL PER CHILD 6-16 YEARS OF AGE PER YEAR, BY SEX: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| AGE | BOTH SEXES | MALE | FEMALE |
|---------------------------|--|--------|--------|
| ALL AGES- 6-16 YEARS----- | DAYS LOST FROM SCHOOL IN THOUSANDS 191,780 | 96,437 | 95,343 |
| ALL AGES- 6-16 YEARS----- | NUMBER OF SCHOOL-LOSS DAYS PER CHILD PER YEAR 4.4 | 4.4 | 4.4 |

Table 18. Number of physician visits and number of physician visits per person per year, by age and sex: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex | All ages | Under 15 years | 15-24 years | 25-44 years | 45-64 years | 65-74 years | 75 years and over |
|--|----------|----------------|-------------|-------------|-------------|-------------|-------------------|
| Number of physician visits in thousands | | | | | | | |
| Both sexes----- | 829,622 | 219,182 | 121,793 | 196,940 | 188,820 | 64,463 | 38,424 |
| Male----- | 351,884 | 116,379 | 43,717 | 69,170 | 82,004 | 26,613 | 14,001 |
| Female----- | 477,738 | 102,803 | 78,076 | 127,770 | 106,816 | 37,850 | 24,423 |
| Number of physician visits per person per year | | | | | | | |
| Both sexes----- | 4.3 | 3.7 | 4.0 | 4.3 | 4.8 | 5.6 | 5.8 |
| Male----- | 3.8 | 3.8 | 3.0 | 3.2 | 4.3 | 5.2 | 5.1 |
| Female----- | 4.8 | 3.5 | 4.8 | 5.4 | 5.2 | 6.0 | 6.3 |

Table 19. Number of persons and percent distribution, by time interval since last physician visit according to sex and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | Total population | Time interval since last physician visit | | | | | | |
|------------------------|------------------|--|-------------|--------|-----------|------------------|-------|---------|
| | | Under 6 months | 6-11 months | 1 year | 2-4 years | 5 years and over | Never | Unknown |
| Both sexes | | Number of persons in thousands | | | | | | |
| All ages----- | 193,403 | 104,142 | 28,924 | 26,325 | 21,565 | 8,454 | 1,017 | 2,977 |
| Under 15 years----- | 59,867 | 31,369 | 10,177 | 9,213 | 6,232 | 1,509 | 677 | 690 |
| 15-24 years----- | 30,555 | 16,738 | 4,906 | 4,194 | 3,088 | 900 | 165 | 564 |
| 25-44 years----- | 45,382 | 24,088 | 6,821 | 6,426 | 5,342 | 1,930 | 56 | 719 |
| 45-64 years----- | 39,570 | 20,966 | 5,198 | 4,897 | 4,937 | 2,737 | 84 | 751 |
| 65 years and over----- | 18,029 | 10,980 | 1,822 | 1,595 | 1,967 | 1,378 | * | 252 |
| Male | | | | | | | | |
| All ages----- | 93,212 | 46,810 | 14,466 | 13,807 | 11,517 | 4,406 | 525 | 1,681 |
| Under 15 years----- | 30,451 | 16,276 | 5,141 | 4,641 | 3,067 | 674 | 319 | 333 |
| 15-24 years----- | 14,367 | 7,052 | 2,536 | 2,244 | 1,674 | 458 | 89 | 314 |
| 25-44 years----- | 21,661 | 9,810 | 3,391 | 3,573 | 3,190 | 1,166 | * | 488 |
| 45-64 years----- | 18,924 | 9,236 | 2,545 | 2,574 | 2,657 | 1,437 | 53 | 423 |
| 65 years and over----- | 7,809 | 4,435 | 853 | 775 | 929 | 672 | * | 123 |
| Female | | | | | | | | |
| All ages----- | 100,191 | 57,332 | 14,459 | 12,518 | 10,047 | 4,048 | 492 | 1,295 |
| Under 15 years----- | 29,416 | 15,093 | 5,036 | 4,572 | 3,164 | 836 | 358 | 357 |
| 15-24 years----- | 16,188 | 9,686 | 2,370 | 1,950 | 1,413 | 442 | 76 | 250 |
| 25-44 years----- | 23,721 | 14,278 | 3,431 | 2,853 | 2,152 | 765 | * | 231 |
| 45-64 years----- | 20,647 | 11,731 | 2,654 | 2,323 | 2,280 | 1,299 | * | 328 |
| 65 years and over----- | 10,219 | 6,544 | 969 | 820 | 1,037 | 706 | * | 129 |
| Both sexes | | Percent distribution | | | | | | |
| All ages----- | 100.0 | 53.8 | 15.0 | 13.6 | 11.2 | 4.4 | 0.5 | 1.5 |
| Under 15 years----- | 100.0 | 52.4 | 17.0 | 15.4 | 10.4 | 2.5 | 1.1 | 1.2 |
| 15-24 years----- | 100.0 | 54.8 | 16.1 | 13.7 | 10.1 | 2.9 | 0.5 | 1.8 |
| 25-44 years----- | 100.0 | 53.1 | 15.0 | 14.2 | 11.8 | 4.3 | 0.1 | 1.6 |
| 45-64 years----- | 100.0 | 53.0 | 13.1 | 12.4 | 12.5 | 6.9 | 0.2 | 1.9 |
| 65 years and over----- | 100.0 | 60.9 | 10.1 | 8.8 | 10.9 | 7.6 | * | 1.4 |
| Male | | | | | | | | |
| All ages----- | 100.0 | 50.2 | 15.5 | 14.8 | 12.4 | 4.7 | 0.6 | 1.8 |
| Under 15 years----- | 100.0 | 53.4 | 16.9 | 15.2 | 10.1 | 2.2 | 1.0 | 1.1 |
| 15-24 years----- | 100.0 | 49.1 | 17.7 | 15.6 | 11.7 | 3.2 | 0.6 | 2.2 |
| 25-44 years----- | 100.0 | 45.3 | 15.7 | 16.5 | 14.7 | 5.4 | * | 2.3 |
| 45-64 years----- | 100.0 | 48.8 | 13.4 | 13.6 | 14.0 | 7.6 | 0.3 | 2.2 |
| 65 years and over----- | 100.0 | 56.8 | 10.9 | 9.9 | 11.9 | 8.6 | * | 1.6 |
| Female | | | | | | | | |
| All ages----- | 100.0 | 57.2 | 14.4 | 12.5 | 10.0 | 4.0 | 0.5 | 1.3 |
| Under 15 years----- | 100.0 | 51.3 | 17.1 | 15.5 | 10.8 | 2.8 | 1.2 | 1.2 |
| 15-24 years----- | 100.0 | 59.8 | 14.6 | 12.0 | 8.7 | 2.7 | 0.5 | 1.5 |
| 25-44 years----- | 100.0 | 60.2 | 14.5 | 12.0 | 9.1 | 3.2 | * | 1.0 |
| 45-64 years----- | 100.0 | 56.8 | 12.9 | 11.3 | 11.0 | 6.3 | * | 1.6 |
| 65 years and over----- | 100.0 | 64.0 | 9.5 | 8.0 | 10.1 | 6.9 | * | 1.3 |

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25, and P-60.

TABLE 20. POPULATION USED IN COMPUTING ANNUAL RATES SHOWN IN THIS PUBLICATION, BY SEX AND AGE: UNITED STATES, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| AGE | BOTH SEXES | MALE | FEMALE |
|-------------------------------|-------------------------------|--------|---------|
| | POPULATION IN THOUSANDS | | |
| ALL AGES----- | 193,403 | 93,212 | 100,191 |
| UNDER 17 YEARS----- | 67,078 | 34,106 | 32,972 |
| UNDER 6 YEARS----- | 23,392 | 11,964 | 11,428 |
| 6-16 YEARS----- | 43,686 | 22,142 | 21,545 |
| 17-44 YEARS----- | 66,726 | 32,373 | 36,353 |
| 17-24 YEARS----- | 23,344 | 10,712 | 12,632 |
| 25-44 YEARS----- | 45,382 | 21,661 | 23,721 |
| 25-34 YEARS----- | 22,062 | 10,498 | 11,565 |
| 35-44 YEARS----- | 23,319 | 11,163 | 12,156 |
| 45 & OVER YEARS----- | 57,599 | 26,733 | 30,866 |
| 45-64 YEARS----- | 39,570 | 18,924 | 20,647 |
| 65 & OVER YEARS----- | 18,029 | 7,809 | 10,219 |
| | CURRENTLY EMPLOYED POPULATION | | |
| ALL AGES-17 & OVER YEARS----- | 75,256 | 47,656 | 27,601 |
| 17-44 YEARS----- | 45,175 | 28,506 | 16,669 |
| 17-24 YEARS----- | 13,965 | 7,813 | 6,152 |
| 25-44 YEARS----- | 31,210 | 20,693 | 10,517 |
| 45 & OVER YEARS----- | 30,082 | 19,149 | 10,933 |
| 45-64 YEARS----- | 21,771 | 14,000 | 7,771 |
| 65 & OVER YEARS----- | 8,311 | 2,210 | 1,100 |

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25 and P-60; and Bureau of Labor Statistics monthly report, Employment and Earnings.

Table 21. Incidence of all acute conditions and acute respiratory conditions per 100 persons per quarter, by sex and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Sex and age | All acute conditions | | | | Acute respiratory conditions | | | |
|--|----------------------|-----------|------------|-----------|------------------------------|-----------|------------|-----------|
| | Jan.-Mar. | Apr.-June | July-Sept. | Oct.-Dec. | Jan.-Mar. | Apr.-June | July-Sept. | Oct.-Dec. |
| Number of conditions per 100 persons per quarter | | | | | | | | |
| <u>Both sexes</u> | | | | | | | | |
| All ages----- | 60.8 | 42.2 | 32.6 | 54.4 | 38.5 | 20.6 | 12.2 | 34.5 |
| Under 6 years----- | 101.8 | 74.6 | 59.8 | 98.0 | 66.0 | 40.2 | 25.2 | 67.1 |
| 6-16 years----- | 74.6 | 51.9 | 36.8 | 64.0 | 47.7 | 26.2 | 14.3 | 40.9 |
| 17-44 years----- | 56.0 | 38.6 | 32.0 | 50.2 | 34.1 | 17.1 | 12.1 | 30.2 |
| 45 years and over----- | 39.3 | 25.9 | 19.1 | 34.7 | 25.4 | 12.5 | 5.4 | 21.8 |
| <u>Male</u> | | | | | | | | |
| All ages----- | 58.0 | 41.8 | 31.0 | 52.2 | 37.4 | 19.8 | 10.8 | 32.8 |
| Under 6 years----- | 103.1 | 78.6 | 61.6 | 98.8 | 68.1 | 40.3 | 25.6 | 65.3 |
| 6-16 years----- | 73.4 | 55.3 | 36.2 | 65.9 | 47.3 | 25.4 | 12.0 | 41.2 |
| 17-44 years----- | 47.1 | 33.4 | 27.8 | 41.8 | 28.8 | 15.1 | 9.9 | 25.4 |
| 45 years and over----- | 38.0 | 24.1 | 17.1 | 32.9 | 25.4 | 11.7 | 4.3 | 20.7 |
| <u>Female</u> | | | | | | | | |
| All ages----- | 63.5 | 42.6 | 34.0 | 56.5 | 39.6 | 21.3 | 13.5 | 36.1 |
| Under 6 years----- | 100.3 | 70.4 | 57.9 | 97.3 | 63.8 | 40.0 | 24.8 | 69.0 |
| 6-16 years----- | 75.9 | 48.3 | 37.4 | 62.1 | 48.2 | 27.0 | 16.7 | 40.5 |
| 17-44 years----- | 63.9 | 43.2 | 35.8 | 57.7 | 38.7 | 18.8 | 14.1 | 34.6 |
| 45 years and over----- | 40.4 | 27.5 | 20.8 | 36.3 | 25.3 | 13.3 | 6.4 | 22.7 |

NOTE: Excluded from these statistics are all conditions involving neither restricted activity nor medical attention.

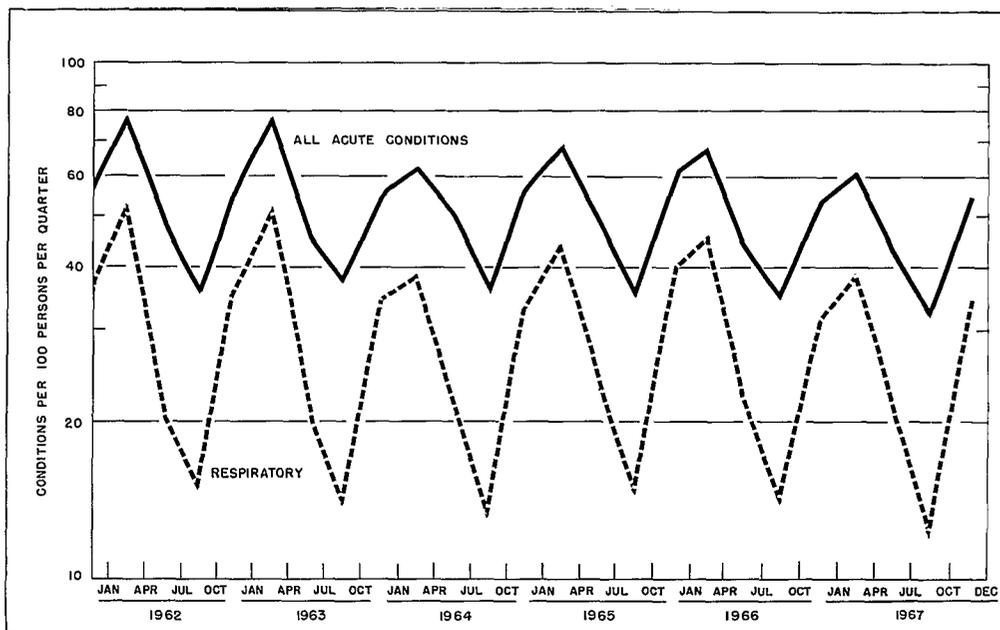


Figure 1. Incidence of all acute conditions and acute respiratory conditions per 100 persons per quarter.

Table 22. Number of persons injured per 100 persons per quarter, by sex, age, and class of accident: United States, 1967

Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II

| Age and class of accident | Both sexes | | | | Male | | | | Female | | | |
|---------------------------|---|---------------|----------------|---------------|---------------|---------------|----------------|---------------|---------------|---------------|----------------|---------------|
| | Jan.- Mar. | Apr.- June | July- Sept. | Oct.- Dec. | Jan.- Mar. | Apr.- June | July- Sept. | Oct.- Dec. | Jan.- Mar. | Apr.- June | July- Sept. | Oct.- Dec. |
| <u>Age</u> | Number of persons injured per 100 persons per quarter | | | | | | | | | | | |
| All ages----- | 6.4 | 7.3 | 7.9 | 5.8 | 7.0 | 9.1 | 9.7 | 6.9 | 5.9 | 5.7 | 6.1 | 4.8 |
| Under 6 years----- | 8.3 | 10.7 | 11.5 | 7.4 | 9.4 | 13.1 | 12.7 | 8.6 | 7.2 | 8.2 | 10.2 | 6.2 |
| 6-16 years----- | 6.2 | 8.1 | 8.5 | 6.6 | 7.1 | 10.8 | 11.8 | 7.7 | 5.2 | 5.3 | 5.2 | 5.5 |
| 17 years and over----- | 6.2 | 6.4 | 7.0 | 5.2 | 6.5 | 7.6 | 8.4 | 6.2 | 5.9 | 5.3 | 5.8 | 4.3 |
| <u>Class of accident</u> | | | | | | | | | | | | |
| All classes----- | 6.4 | 7.3 | 7.9 | 5.8 | 7.0 | 9.1 | 9.7 | 6.9 | 5.9 | 5.7 | 6.1 | 4.8 |
| Moving motor vehicle----- | 0.5 | 0.6 | 0.5 | 0.4 | 0.5 | 0.3 | 0.4 | 0.4 | 0.6 | 0.8 | 0.5 | 0.4 |
| While at work----- | 1.2 | 1.4 | 1.2 | 0.9 | 2.4 | 2.6 | 2.0 | 1.6 | 0.2 | 0.4 | 0.3 | 0.3 |
| Home----- | 2.7 | 3.2 | 3.8 | 2.2 | 2.0 | 3.3 | 3.7 | 2.1 | 3.4 | 3.1 | 3.8 | 2.4 |
| Other----- | 2.2 | 2.4 | 2.7 | 2.3 | 2.6 | 3.3 | 3.8 | 3.0 | 1.8 | 1.5 | 1.7 | 1.8 |

NOTES: Excluded from these statistics are all conditions involving neither restricted activity nor medical attention. The sum of the rates for the four classes of accidents may be greater than the total because the classes are not mutually exclusive.

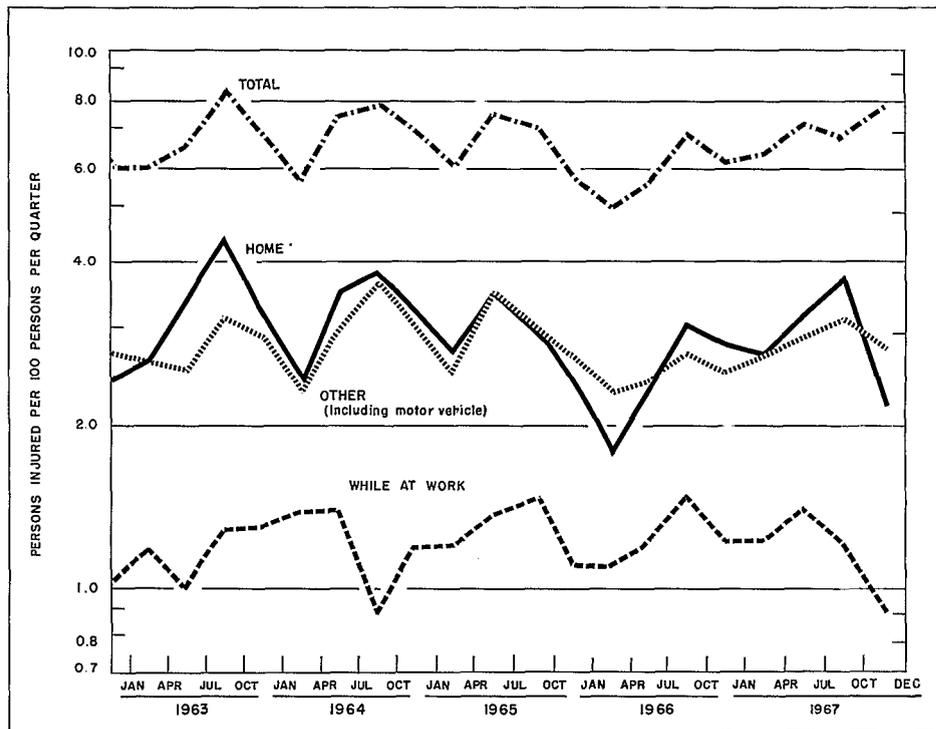


Figure 2. Persons injured per 100 persons per quarter, by class of accident.

Table 23. Days of disability per person per quarter, by sex, type of disability, and age: United States, 1967

[Data are based on household interviews of the civilian, noninstitutional population. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

| Type of disability and age | Both sexes | | | | Male | | | | Female | | | |
|---|---|-----------|------------|-----------|-----------|-----------|------------|-----------|-----------|-----------|------------|-----------|
| | Jan.-Mar. | Apr.-June | July-Sept. | Oct.-Dec. | Jan.-Mar. | Apr.-June | July-Sept. | Oct.-Dec. | Jan.-Mar. | Apr.-June | July-Sept. | Oct.-Dec. |
| <u>Days of restricted activity</u> | Days of disability per person per quarter | | | | | | | | | | | |
| All ages----- | 4.3 | 3.9 | 3.3 | 3.9 | 3.8 | 3.6 | 3.1 | 3.4 | 4.7 | 4.1 | 3.5 | 4.3 |
| Under 6 years----- | 3.1 | 2.3 | 1.4 | 3.1 | 3.4 | 2.5 | 1.4 | 3.2 | 2.8 | 2.2 | 1.5 | 3.1 |
| 6-16 years----- | 2.9 | 2.3 | 1.3 | 2.4 | 2.8 | 2.4 | 1.4 | 2.4 | 3.0 | 2.1 | 1.2 | 2.4 |
| 17-44 years----- | 3.5 | 3.1 | 2.8 | 3.1 | 2.8 | 2.7 | 2.2 | 2.3 | 4.1 | 3.5 | 3.2 | 3.8 |
| 45-64 years----- | 5.6 | 5.6 | 4.9 | 4.9 | 5.6 | 5.4 | 5.0 | 4.6 | 5.6 | 5.7 | 4.8 | 5.3 |
| 65 years and over----- | 9.1 | 9.0 | 8.9 | 8.8 | 7.5 | 8.4 | 9.2 | 7.8 | 10.4 | 9.4 | 8.6 | 9.6 |
| <u>Days of bed disability</u> | | | | | | | | | | | | |
| All ages----- | 1.6 | 1.4 | 1.2 | 1.6 | 1.4 | 1.2 | 1.0 | 1.4 | 1.8 | 1.6 | 1.3 | 1.8 |
| Under 6 years----- | 1.3 | 1.0 | 0.6 | 1.2 | 1.4 | 1.0 | 0.7 | 1.2 | 1.3 | 1.0 | 0.6 | 1.2 |
| 6-16 years----- | 1.4 | 1.0 | 0.4 | 1.1 | 1.3 | 1.0 | 0.4 | 1.0 | 1.4 | 1.0 | 0.5 | 1.2 |
| 17-44 years----- | 1.4 | 1.1 | 1.0 | 1.4 | 1.0 | 0.8 | 0.8 | 1.1 | 1.7 | 1.3 | 1.2 | 1.6 |
| 45-64 years----- | 1.8 | 1.9 | 1.7 | 1.8 | 1.8 | 1.7 | 1.5 | 1.6 | 1.8 | 2.0 | 1.9 | 1.9 |
| 65 years and over----- | 3.0 | 3.0 | 3.1 | 3.3 | 2.6 | 2.1 | 2.8 | 2.9 | 3.3 | 3.7 | 3.3 | 3.6 |
| <u>Days of work loss, 17 years and over</u> | | | | | | | | | | | | |
| All ages, 17 years and over----- | 1.6 | 1.3 | 1.1 | 1.3 | 1.5 | 1.4 | 1.1 | 1.3 | 1.6 | 1.3 | 1.1 | 1.5 |
| 17-44 years----- | 1.4 | 1.1 | 1.0 | 1.2 | 1.2 | 1.0 | 1.0 | 1.1 | 1.5 | 1.3 | 1.1 | 1.5 |
| 45-64 years----- | 1.9 | 1.7 | 1.4 | 1.5 | 1.9 | 1.8 | 1.4 | 1.5 | 1.7 | 1.4 | 1.2 | 1.4 |
| 65 years and over----- | 2.1 | 1.7 | 1.2 | 1.9 | 2.0 | 2.1 | 1.3 | 1.6 | 2.3 | 0.8 | 0.8 | 2.4 |
| School-loss days, 6-16 years----- | 1.7 | 1.2 | 0.2 | 1.3 | 1.6 | 1.4 | 0.1 | 1.3 | 1.8 | 1.1 | 0.2 | 1.4 |

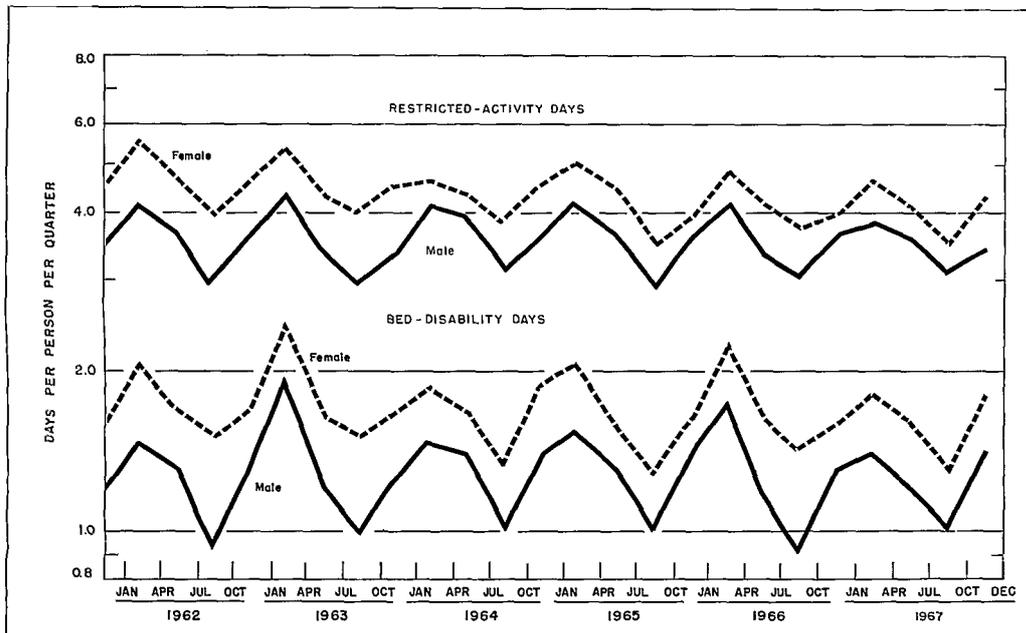


Figure 3. Disability days per person per quarter, by type of disability and sex.

Table 24. Number and percent distribution of persons 17 years of age and over in population, by cigarette smoking status according to sex and age: United States, Current Population Survey, June 1966

| Sex and age | Population in thousands | Total population | Cigarette smoking status | | | |
|--------------------------|-------------------------|----------------------|--------------------------|---------------|--------------|------------------------|
| | | | Present smoker | Former smoker | Never smoked | Unknown if ever smoked |
| <u>Both sexes</u> | | Percent distribution | | | | |
| All ages, 17+ years----- | 124,500 | 100.0 | 39.6 | 11.5 | 46.4 | 2.5 |
| 17-24 years----- | 22,711 | 100.0 | 37.6 | 4.4 | 55.7 | 2.3 |
| 25-44 years----- | 45,132 | 100.0 | 49.6 | 11.7 | 36.7 | 2.0 |
| 45-64 years----- | 38,960 | 100.0 | 40.2 | 14.5 | 42.4 | 3.0 |
| 65+ years----- | 17,697 | 100.0 | 15.3 | 13.8 | 68.0 | 2.9 |
| <u>Male</u> | | | | | | |
| All ages, 17+ years----- | 58,469 | 100.0 | 48.6 | 17.2 | 31.4 | 2.8 |
| 17-24 years----- | 10,529 | 100.0 | 44.4 | 4.6 | 48.3 | 2.7 |
| 25-44 years----- | 21,536 | 100.0 | 57.9 | 16.0 | 23.9 | 2.2 |
| 45-64 years----- | 18,688 | 100.0 | 50.1 | 21.9 | 24.8 | 3.3 |
| 65+ years----- | 7,717 | 100.0 | 24.6 | 26.7 | 45.4 | 3.2 |
| <u>Female</u> | | | | | | |
| All ages, 17+ years----- | 66,031 | 100.0 | 31.6 | 6.5 | 59.7 | 2.2 |
| 17-24 years----- | 12,182 | 100.0 | 31.6 | 4.2 | 62.2 | 2.0 |
| 25-44 years----- | 23,596 | 100.0 | 42.1 | 7.9 | 48.3 | 1.7 |
| 45-64 years----- | 20,272 | 100.0 | 31.1 | 7.6 | 58.7 | 2.6 |
| 65+ years----- | 9,980 | 100.0 | 8.1 | 3.8 | 85.5 | 2.6 |

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25, and P-60.

Table 25. Number and percent distribution of persons 17 years of age and over in population, by cigarette smoking status according to sex and age: United States, Current Population Survey, August 1967

| Sex and age | Population in thousands | Total population | Cigarette smoking status | | | |
|--------------------------|-------------------------|----------------------|--------------------------|---------------|--------------|------------------------|
| | | | Present smoker | Former smoker | Never smoked | Unknown if ever smoked |
| <u>Both sexes</u> | | Percent distribution | | | | |
| All ages, 17+ years----- | 126,579 | 100.0 | 39.1 | 12.3 | 46.2 | 2.5 |
| 17-24 years----- | 23,377 | 100.0 | 37.0 | 4.9 | 55.8 | 2.4 |
| 25-44 years----- | 45,488 | 100.0 | 48.5 | 12.6 | 36.9 | 2.0 |
| 45-64 years----- | 39,649 | 100.0 | 40.0 | 15.2 | 42.0 | 2.8 |
| 65+ years----- | 18,064 | 100.0 | 16.0 | 14.4 | 66.5 | 3.1 |
| <u>Male</u> | | | | | | |
| All ages, 17+ years----- | 59,248 | 100.0 | 47.8 | 18.2 | 31.4 | 2.6 |
| 17-24 years----- | 10,739 | 100.0 | 43.8 | 5.2 | 48.3 | 2.7 |
| 25-44 years----- | 21,733 | 100.0 | 56.3 | 16.9 | 24.9 | 2.0 |
| 45-64 years----- | 18,956 | 100.0 | 49.6 | 23.1 | 24.4 | 2.9 |
| 65+ years----- | 7,821 | 100.0 | 25.5 | 27.8 | 43.4 | 3.3 |
| <u>Female</u> | | | | | | |
| All ages, 17+ years----- | 67,330 | 100.0 | 31.4 | 7.0 | 59.3 | 2.3 |
| 17-24 years----- | 12,638 | 100.0 | 31.2 | 4.7 | 62.1 | 2.0 |
| 25-44 years----- | 23,755 | 100.0 | 41.3 | 8.8 | 48.0 | 1.9 |
| 45-64 years----- | 20,694 | 100.0 | 31.3 | 7.9 | 58.1 | 2.7 |
| 65+ years----- | 10,243 | 100.0 | 8.7 | 4.2 | 84.2 | 2.9 |

NOTE: For official population estimates for more general use, see Bureau of the Census reports on the civilian population of the United States, in Current Population Reports: Series P-20, P-25, and P-60.

APPENDIX I

TECHNICAL NOTES ON METHODS

Background of This Report

This report is one of a series of statistical reports prepared by the National Health Survey. All statistics, other than those on smoking which came from the Current Population Survey, are based on information collected in a continuing nationwide sample of households in the Health Interview Survey, a major part of the program.

The Health Interview Survey utilizes a questionnaire which, in addition to personal and demographic characteristics, obtains information on illnesses, injuries, chronic conditions and impairments, and other health topics. As data relating to each of these various broad topics are tabulated and analyzed, separate reports are issued which cover one or more of the specific topics. The present report is based on the consolidated sample for 52 weeks of interviewing in 1967.

The population covered by the sample for the Health Interview Survey is the civilian, noninstitutional population of the United States living at the time of the interview. The sample does not include members of the Armed Forces, U.S. nationals living in foreign countries, or crews of vessels. It should also be noted that events experienced during the 2-week period covered by the survey by persons who were not living at the time of the household interview are excluded.

Statistical Design of the Health Interview Survey

General plan.—The sampling plan of the survey follows a multistage probability design which permits a continuous sampling of the civilian population of the United States. The first stage of this design consists of drawing a sample of 357 from about 1,900 geographically defined primary sampling units (PSU's) into which the United States has been divided. A PSU is a county, a group of contiguous counties, or a standard metropolitan statistical area.

With no loss in general understanding, the remaining stages can be combined and treated in this discussion as an ultimate stage. Within PSU's, then, ultimate stage units called segments are defined in such a manner that each segment contains an expected nine households. A segment consists of a cluster of neighboring households or addresses. Two general types of segments are used: (1) area segments which are defined geographically, and (2) B segments which are defined from a list of addresses from the Decennial Census

and Survey of Construction. Each week a random sample of about 90 segments is drawn. In the approximately 800 households in these segments, household members are interviewed concerning factors related to health.

Since the household members interviewed each week are a representative sample of the population, samples for successive weeks can be combined into larger samples. Thus the design permits both continuous measurement of characteristics of high incidence or prevalence in the population and, through the larger consolidated samples, more detailed analysis of less common characteristics and smaller categories. The continuous collection has administrative and operational advantages as well as technical assets since it permits field work to be handled with an experienced, stable staff.

Sample size and geographic detail.—The national sample plan for calendar year 1967 included about 134,000 persons from 42,000 households in about 4,700 segments.

The overall sample was designed in such a fashion that tabulations can be provided for each of the major geographic regions and for urban and rural sectors of the United States.

Collection of data.—Field operations for the household survey are performed by the Bureau of the Census under specifications established by the National Center for Health Statistics. In accordance with these specifications the Bureau of the Census selects the sample, conducts the field interviewing as an agent of the Center, and performs a manual editing and coding of the questionnaires. The Health Interview Survey, using Center electronic computers, carries out further editing and tabulates the edited data.

Estimating methods.—Each statistic produced by the survey—for example, the number of bed-disability days occurring in a specified period—is the result of two stages of ratio estimation. In the first of these, the control factor is the ratio of the 1960 decennial population count to the 1960 estimated population in the National Health Survey's first-stage sample of PSU's. These factors are applied for some 25 color-residence classes.

Later, ratios of official Bureau of the Census figures for current population to sample-produced estimates of the population in about 60 age-sex-color classes are computed and serve as second-stage factors for ratio estimating.

The effect of the ratio-estimating process is to make the sample more closely representative of the population by age, sex, color, and residence, thus reducing sampling variance.

As noted, each week's sample represents the population living during that week and characteristics of this population. Consolidation of samples over a time period, say a calendar quarter, produces estimates of average characteristics of the U.S. population for that calendar quarter. Similarly, population data for a year are averages of the four quarterly figures.

For statistics measuring the number of occurrences during a specified time period, such as the incidence of acute conditions, a similar computational procedure is used, but the statistics are interpreted differently. For these items, the questionnaire asks for the respondent's experience over the 2 calendar weeks prior to the week of interview. In such instances the estimated quarterly total for the statistic is simply 6.5 times the average 2-week estimate produced by the 13 successive samples taken during the period. The annual total is the sum of the four quarters. Thus, the experience of persons *interviewed during a year*—experience which actually occurred for each person in a 2-calendar-week interval prior to week of interview—is treated as though it measured the total of such experience *during the year*. Such interpretation leads to no significant bias.

General Qualifications

Nonresponse.—Data were adjusted for nonresponse by a procedure which imputes to persons in a household which was not interviewed the characteristics of persons in households in the same segment which were interviewed. The total noninterview rate was 5 percent—1 percent was refusal, and the remainder was primarily due to the failure to find any eligible household respondent after repeated trials.

The interview process.—The statistics presented in this report are based on replies secured in interviews of persons in the sampled households. Each person 19 years of age and over, available at the time of interview, was interviewed individually. Proxy respondents within the household were employed for children and for adults not available at the time of the interview, provided the respondent was closely related to the person about whom information was being obtained.

There are limitations to the accuracy of diagnostic and other information collected in household interviews. For diagnostic information, the household respondent can, at best, pass on to the interviewer only the information the physician has given the family. For conditions not medically attended, diagnostic information is often no more than a description of symptoms. However, other facts, such as the number of disability days caused by the condition, can be obtained more accurately from household members than from any other source

since only the persons concerned are in a position to report this information.

Rounding of numbers.—The original tabulations on which the data in this report are based show all estimates to the nearest whole unit. All consolidations were made from the original tabulations using the estimates to the nearest unit. In the final published tables the figures are rounded to the nearest thousand, although these are not necessarily accurate to that detail. Devised statistics, such as rates and percent distributions, are computed after the estimates on which these are based have been rounded to the nearest thousand.

Population figures.—Some of the published tables include population figures for specified categories. Except for certain overall totals by age and sex, which are adjusted to independent estimates, these figures are based on the sample of households in the National Health Survey. These are given primarily to provide denominators for rate computation and for this purpose are more appropriate for use with the accompanying measures of health characteristics than other population data that may be available. In some instances these will permit users to recombine published data into classes more suitable to their specific needs. With the exception of the overall totals by age and sex mentioned above, the population figures differ from corresponding figures (which are derived from different sources) published in reports of the Bureau of the Census. For population data for general use, see the official estimates presented in Bureau of the Census reports in the P-20, P-25, and P-60 series.

Reliability of Estimates

Since the estimates are based on a sample, they will differ somewhat from the figures that would have been obtained if a complete census had been taken using the same schedules, instructions, and interviewing personnel and procedures. As in any survey, the results are also subject to measurement error.

The standard error is primarily a measure of sampling variability, that is, the variations that might occur by chance because only a sample of the population is surveyed. As calculated for this report, the standard error also reflects part of the variation which arises in the measurement process. It does not include estimates of any biases which might lie in the data. The chances are about 68 out of 100 that an estimate from the sample would differ from a complete census by less than the standard error. The chances are about 95 out of 100 that the difference would be less than twice the standard error and about 99 out of 100 that it would be less than 2½ times as large.

The relative standard error of an estimate is obtained by dividing the standard error of the estimate by the estimate itself and is expressed as a percentage of the estimate. Included in this appendix are charts from

which the relative standard errors can be determined for estimates shown in the report. In order to derive relative errors which would be applicable to a wide variety of health statistics and which could be prepared at a moderate cost, a number of approximations were required. As a result, the charts provide an estimate of the approximate relative standard error rather than the precise error for any specific aggregate or percentage.

Three classes of statistics for the health survey are identified for purposes of estimating variances.

Narrow range.—This class consists of (1) statistics which estimate a population attribute, e.g., the number of persons in a particular income group, and (2) statistics for which the measure for a single individual for the period of reference is usually either 0 or 1, on occasion may take on the value 2, and very rarely 3.

Medium range.—This class consists of other statistics for which the measure for a single individual for the period of reference will rarely lie outside the range 0 to 5.

Wide range.—This class consists of statistics for which the measure for a single individual for the period of reference frequently will range from 0 to a number in excess of 5, e.g., the number of days of bed disability experienced during the year.

In addition to classifying variables according to whether they are narrow-, medium-, or wide-range, statistics in the survey are further defined as:

Type A.—Statistics on prevalence and incidence data for which the period of reference in the questionnaire is 12 months.

Type B.—Incidence-type statistics for which the period of reference in the questionnaire is 2 weeks.

Type C.—Statistics for which the reference period is 6 months.

Only the charts on sampling error applicable to data contained in this report are presented.

General rules for determining relative sampling errors.—The "guide" on page 35, together with the following rules, will enable the reader to determine approximate relative standard errors from the charts for estimates presented in this report.

Rule 1. *Estimates of aggregates:* Approximate relative standard errors for estimates of aggregates such as the number of persons with a given characteristic are obtained

from appropriate curves on pages 36-39. The number of persons in the total U.S. population or in an age-sex class of the total population is adjusted to official Bureau of the Census figures and is not subject to sampling error.

Rule 2. *Estimates of percentages in a percent distribution:* Relative standard errors for percentages in a percent distribution of a total are obtained from appropriate curves on page 40. For values which do not fall on one of the curves presented in the chart, visual interpolation will provide a satisfactory approximation.

Rule 3. *Estimates of rates where the numerator is a subclass of the denominator:* (Not required for statistics presented in this report.)

Rule 4. *Estimates of rates where the numerator is not a subclass of the denominator:* This rule applies where a unit of the numerator often occurs more than once for any one unit in the denominator. For example, in the computation of the number of persons injured per 100 currently employed persons per year, it is possible that a person in the denominator could have sustained more than one of the injuries included in the numerator. Approximate relative standard errors for rates of this kind may be computed as follows:

- (a) Where the denominator is the total U.S. population or includes all persons in one or more of the age-sex groups of the total population, the relative error of the rate is equivalent to the relative error of the numerator which can be obtained directly from the appropriate chart.
- (b) In other cases, obtain the relative standard error of the numerator and of the denominator from the appropriate curve. Square each of these relative errors, add the resulting values, and extract the square root of the sum. This procedure will result in an upper bound and often will overstate the error.

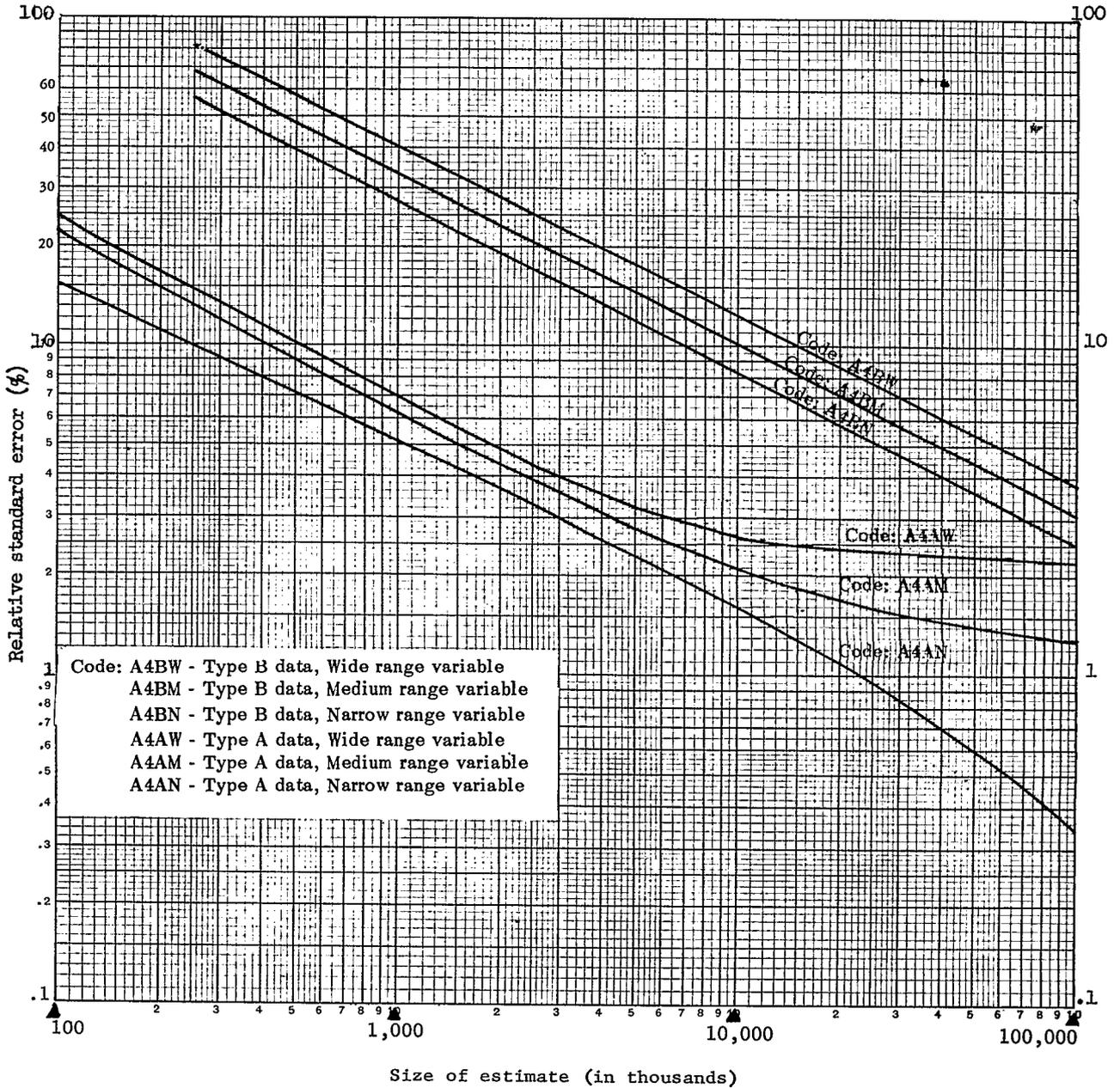
Guide to Use of Relative Standard Error Charts

The code shown below identifies the appropriate curve to be used in estimating the relative standard error of the statistic described. The four components of each code describe the statistic as follows: (1)

A=aggregate, P=percentage; (2) the number of calendar quarters of data collection; (3) the type of the statistic as described on page 34; and (4) the range of the statistic as described on page 34.

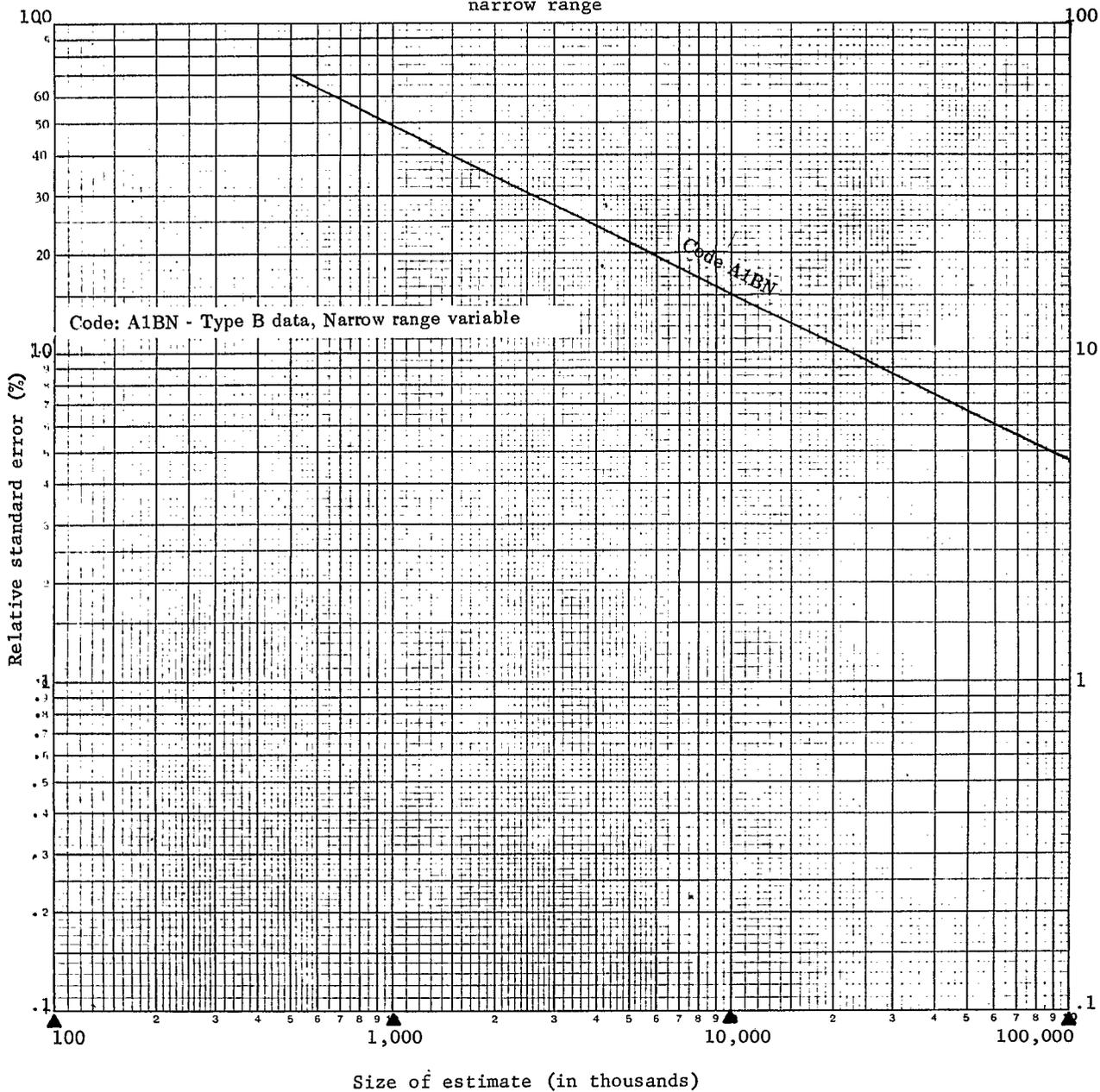
| Statistic | Use: | | |
|--|---------------------------------|--|--|
| | Rule | Code | on page |
| Number of Persons in the U.S. population, or total number in any age-sex category----- Persons in any other population group----- | 1 | Not subject to sampling error A4AN | 36 |
| Acute conditions: Per quarter----- Per year----- | 1 1 | A1BN A4BN | 37 36 |
| Persons with limitation of activity----- Persons injured----- Hospital discharges----- Days for hospital discharges----- Persons with hospital episodes----- Days in year for hospital episodes----- Physician visits----- | 1 1 1 1 1 1 1 | A4AN A4BN A4CN A4CW A4AN A4AW A4BM | 36 36 38 38 36 38 36 |
| Disability days: Per quarter----- Per year----- | 1 1 | A1BW A4BW | 39 36 |
| Rates per 100 persons: Acute conditions: Per quarter----- Per year----- | 4(a) 4(a) | A1BN A4BN | 37 36 |
| Persons injured----- Hospital discharges----- Average length of stay----- Days per person with episodes per year----- | 4(a) 4(a) 4(b) 4(b) | A4BN A4CN { Numer.: A4CW { Denom.: A4CN { Numer.: A4AW { Denom.: A4AN | 36 38 38 36 36 |
| Disability days: Per quarter----- Per year----- | 4(a) 4(a) | A1BW A4BW | 39 36 |
| Percentage distribution of: Persons with limitation of activity----- Persons with hospital episodes----- Persons by interval since last physician visit----- | 2 2 2 | P4AN-M P4AN-M P4AN-M | 40 40 40 |
| Physician visits per person per year----- | 4(a) | A4BM | 36 |

Relative standard errors for aggregates based on four quarters of data collection
for data of all types and ranges



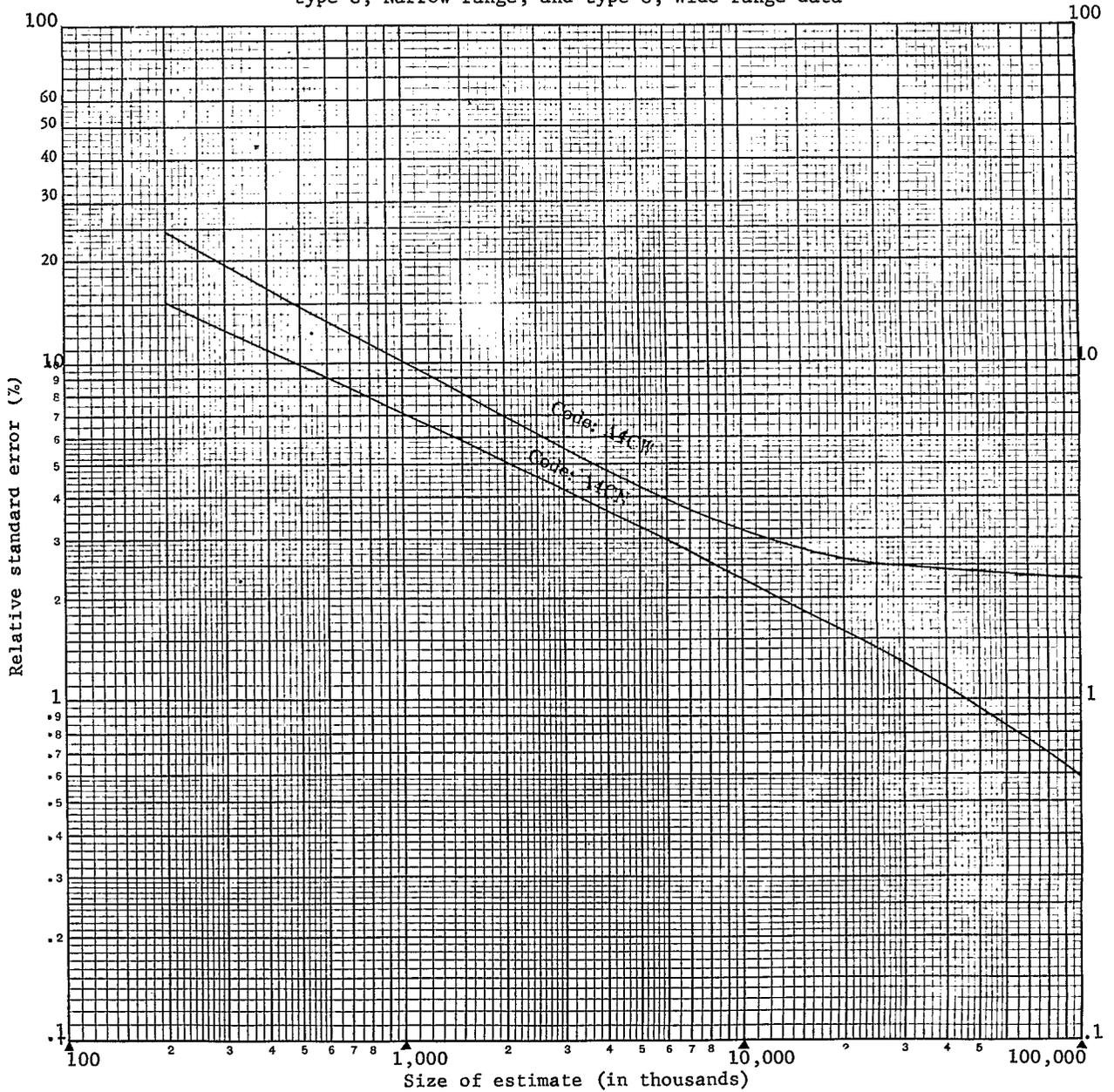
Example of use of chart: An aggregate of 2,000,000 (on scale at bottom of chart) for a Narrow range Type A statistic (code: A4AN) has a relative standard error of 3.6 percent, (read from scale at left side of chart), or a standard error of 72,000 (3.6 percent of 2,000,000). For a Wide range Type B statistic (code: A4BW), an aggregate of 6,000,000 has a relative error of 16.0 percent or a standard error of 960,000 (16 percent of 6,000,000).

Relative standard errors for aggregates based on one quarter of data for type B data,
 narrow range



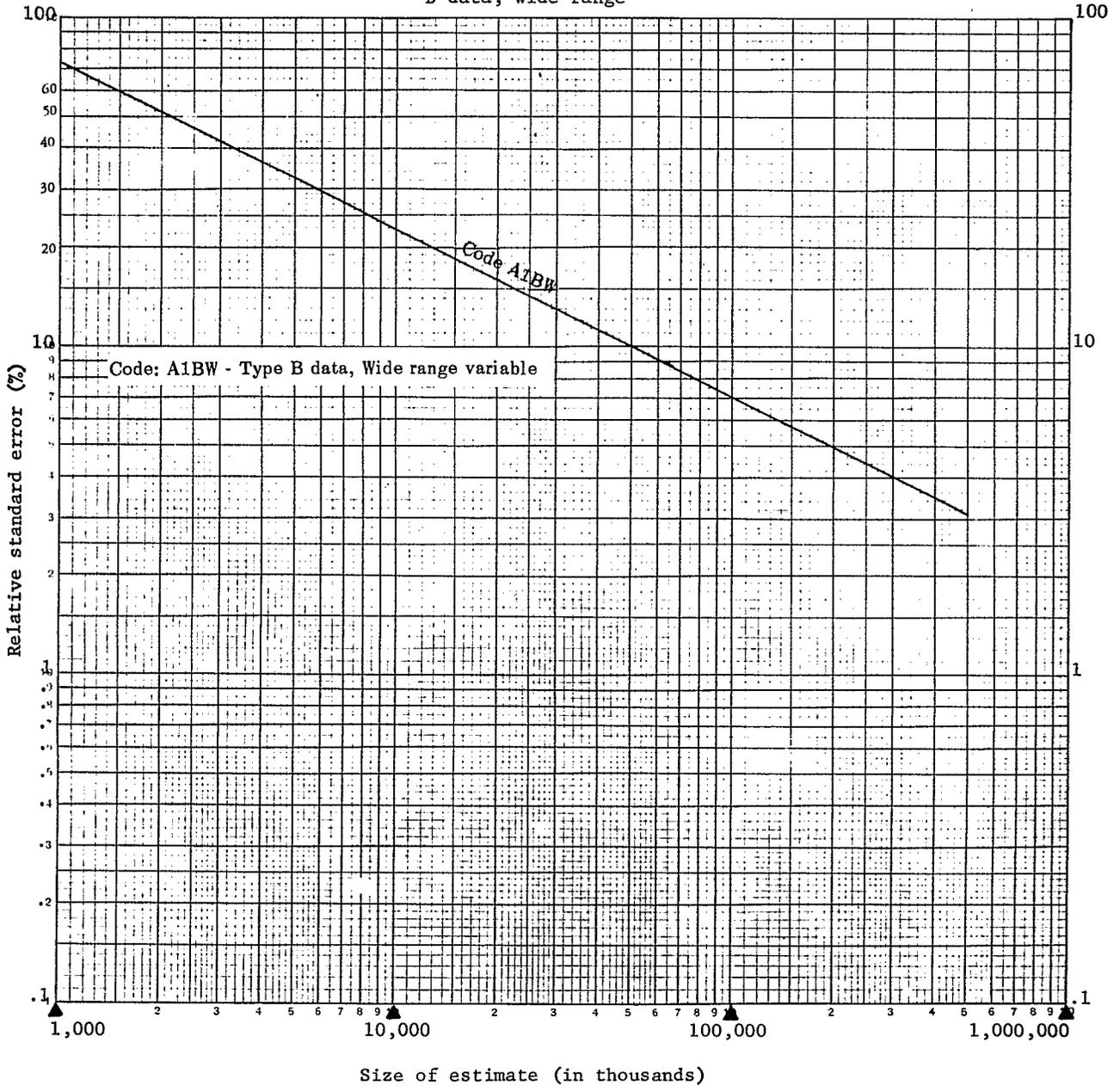
Example of use of chart: An aggregate of 6,000,000 (on scale at bottom of chart) for a Narrow range Type B statistic has a relative standard error of 19.3 percent, read from scale at left side of chart, or a standard error of 1,158,000 (19.3 percent of 6,000,000).

Relative standard errors for aggregates based on four quarters of data collection for type C, Narrow range, and type C, Wide range data



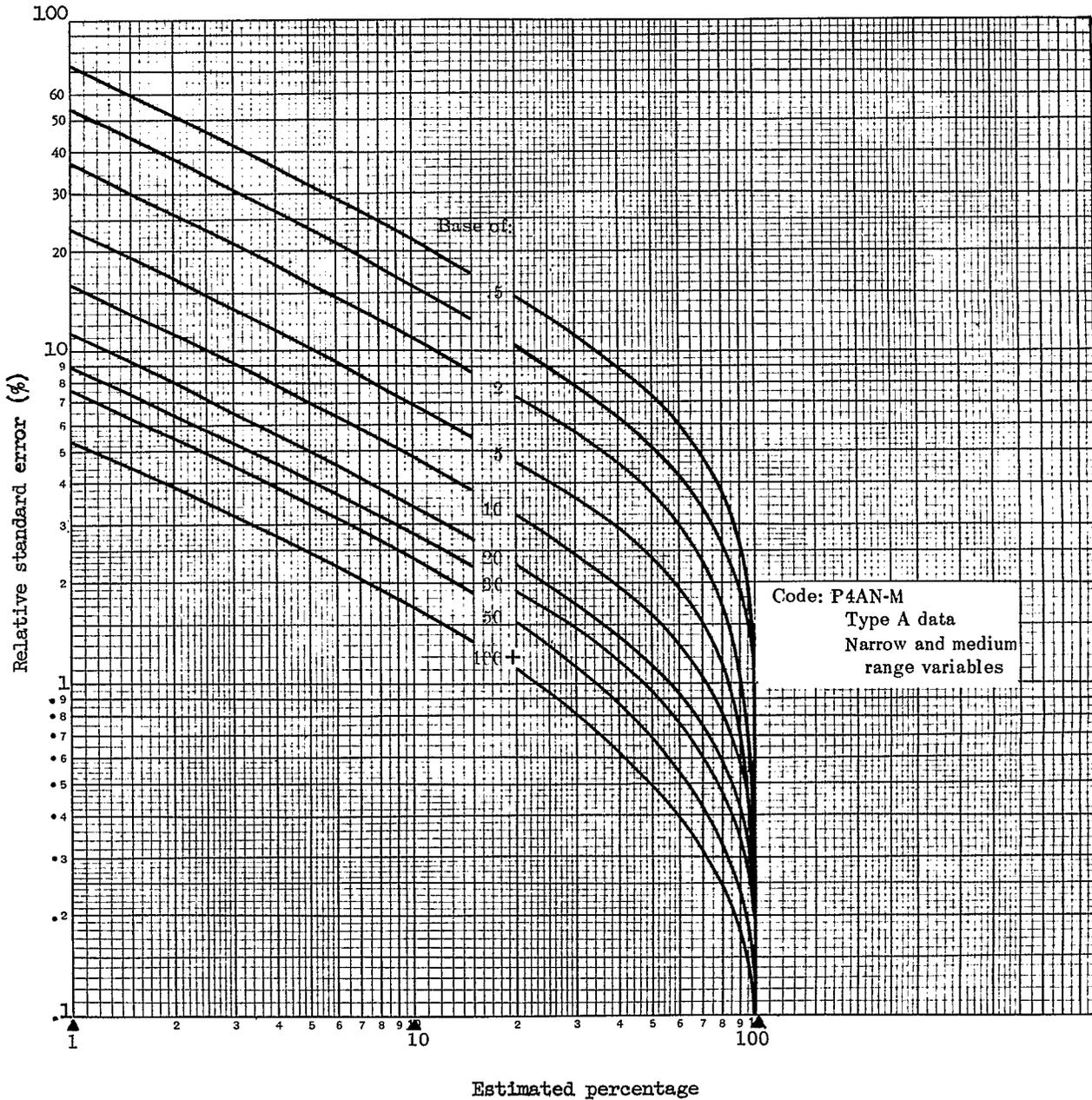
Example of use of chart: An aggregate of 1,000,000 (on scale at bottom of chart) for a Narrow range type C statistic (code: A4CN) has a relative standard error of 7.1 percent, read from scale at left side of chart, or a standard error of 71,000 (7.1 percent of 1,000,000).

Relative standard errors for aggregates based on one quarter of data collection for type B data, wide range



Example of use of chart: An aggregate of 20,000,000 (on scale at bottom of chart) for a wide range type B statistic has a relative standard error of 16.0 percent, read from scale at left side of chart, or a standard error of 3,200,000 (16.0 percent of 20,000,000).

Relative standard errors for percentages based on four quarters of data collection
 for type A data, Narrow and Medium range
 (Base of percentage shown on curves in millions)



Example of use of chart: An estimate of 20 percent (on scale at bottom of chart) based on an estimate of 10,000,000 has a relative standard error of 3.2 percent (read from the scale at the left side of the chart), the point at which the curve for a base of 10,000,000 intersects the vertical line for 20 percent. The standard error in percentage points is equal to 20 percent X 3.2 percent or 0.64 percentage points.

APPENDIX II

DEFINITIONS OF CERTAIN TERMS USED IN THIS REPORT

Terms Relating to Conditions

Condition.—A morbidity condition, or simply a condition, is any entry on the questionnaire which describes a departure from a state of physical or mental well-being. It results from a positive response to one of a series of "medical-disability impact" or "illness-recall" questions. In the coding and tabulating process conditions are selected or classified according to a number of different criteria, such as whether they were medically attended; whether they resulted in disability; whether they were acute or chronic; or according to the type of disease, injury, impairment, or symptom reported. For the purposes of each published report or set of tables, only those conditions recorded on the questionnaire which satisfy certain stated criteria are included.

Acute conditions are classified by type according to the International Classification of Diseases, 1955 Revision, with certain modifications adopted to make the code more suitable for a household-interview-type survey.

Acute condition.—An acute condition is defined as a condition which has lasted less than 3 months and which has involved either medical attention or restricted activity. Because of the procedures used to estimate incidence, the acute conditions included in this report are the conditions which had their onset during the 2 weeks prior to the interview week and which involved either medical attention or restricted activity during the 2-week period. However, it excludes certain conditions which are always classified as chronic (listed below) even though the onset occurred within 3 months prior to week of interview.

Conditions always classified as chronic:

| | |
|-----------------------------|---------------------------|
| Asthma | Stomach ulcer |
| Hay fever | Any other chronic |
| Tuberculosis | stomach trouble |
| Chronic bronchitis | Kidney stones or chronic |
| Repeated attacks of sinus | kidney trouble |
| trouble | Arthritis or rheumatism |
| Rheumatic fever | Mental illness |
| Hardening of the arteries | Diabetes |
| High blood pressure | Thyroid trouble or goiter |
| Heart trouble | Any allergy |
| Stroke | Epilepsy |
| Trouble with varicose veins | Chronic nervous trouble |
| Hemorrhoids or piles | Cancer |
| Tumor, cyst, or growth | Chronic skin trouble |
| Chronic gallbladder or | Hernia or rupture |
| liver trouble | Prostate trouble |

| | |
|---------------------------|-------------------------|
| Deafness or serious | Paralysis of any kind |
| trouble with hearing | Repeated trouble with |
| Serious trouble with see- | back or spine |
| ing, even when wearing | Club foot |
| glasses | Permanent stiffness or |
| Cleft palate | deformity of the foot, |
| Any speech defect | leg, fingers, arm, or |
| Missing fingers, hand, or | back |
| arm—toes, foot, or leg | Condition present since |
| Palsy | birth |

Condition groups.—Conditions are classified according to the International Classification of Diseases, 1955 Revision, with certain modifications adopted to make the code more suitable for a household-interview survey. In this report, all tables which have data classified by type of condition employ a 5-category regrouping plus several selected subgroups. The International Classification code numbers included in each category are shown below.

| Condition Groups | International Classification Code Number (excluding chronic inclusions) |
|---|---|
| Infective and parasitic diseases----- | 021-139 |
| Common childhood diseases----- | 056, 085-087, 089 |
| The virus, H.O.S.----- | ... |
| Other infective and parasitic diseases----- | 021-055, 057-084, 088, 090-138 |
| Respiratory conditions----- | 470-501, 511, 517-525, 527, 785 |
| Upper respiratory conditions----- | 470-475, 511, 517 |
| Common cold----- | 470 |
| Other acute upper respiratory | |
| conditions----- | 471-475, 511, 517 |
| Influenza----- | 480-483 |
| Influenza with digestive | |
| manifestations----- | 482 |
| Other influenza----- | 480, 481, 483 |
| Other respiratory conditions----- | 490-501, 518-525, 527, 785 |
| Pneumonia----- | 490-493 |
| Bronchitis----- | 500, 501 |
| Other acute respiratory conditions----- | 518-525, 527, 785 |
| Digestive system conditions----- | 530-539, 543-553, 570, 571, 573-587, 784, 785 |
| Dental conditions----- | 530-535 |
| Functional and symptomatic upper | |
| gastrointestinal disorders, H.E.C----- | 544, 784 |
| Other digestive system conditions----- | 536-539, 543, 545-553, 570, 571, 573-597, 785 |
| Injuries----- | H900-H935, H990-H994, H996-H999 |
| Fractures, dislocations, sprains, and | |
| sprains----- | H900-H948 |
| Fractures and dislocations----- | H900-H939 |
| Sprains and strains----- | H940-H948 |
| Open wounds and lacerations----- | H970-H985, H990-H995, H990-H993 |
| Contusions and superficial injuries----- | H910-H929 |
| Other current injuries----- | H850-H869, H930-H994, H996-H999 |
| All other acute conditions----- | All other acute code numbers |
| Diseases of the ear----- | 330-336, 781.3 |
| Headaches----- | 791 |
| Genitourinary disorders----- | 530-637, 786, 789 |
| Deliveries and disorders of pregnancy | |
| and the puerperium----- | 640-699 |
| Diseases of the skin----- | 690-716 |
| Diseases of the musculoskeletal system----- | 726-743, 787 |
| All other acute conditions----- | Other acute code numbers |

Terms Relating to Chronic Conditions

Condition.—A morbidity condition, or simply a condition, is any entry on the questionnaire which describes a departure from a state of physical or mental well-being. It results from a positive response to one of a series of "medical-disability impact" or "illness-recall" questions. In the coding and tabulating process conditions are selected or classified according to a number of different criteria, such as whether they were medically attended; whether they resulted in disability; whether they were acute or chronic; or according to the type of disease, injury, impairment, or symptom reported. For the purposes of each published report or set of tables, only those conditions recorded on the questionnaire which satisfy certain stated criteria are included.

Conditions, except impairments, are coded by type according to the International Classification of Diseases with certain modifications adopted to make the code more suitable for a household-interview-type survey.

Chronic condition.—A condition is considered to be chronic if (1) it is described by the respondent in terms of one of the chronic diseases on the "Check List of Chronic Conditions" or in terms of one of the types of impairments on the "Check List of Impairments," or (2) the condition is described by the respondent as having been first noticed more than 3 months before the week of the interview.

Impairments.—Impairments are chronic or permanent defects, usually static in nature, resulting from disease, injury, or congenital malformation. They represent decrease or loss of ability to perform various functions, particularly those of the musculoskeletal system and the sense organs. All impairments are classified by means of a special supplementary code for impairments. Hence, code numbers for impairments in the International Classification of Diseases are not used. In the Supplementary Code, impairments are grouped according to type of functional impairment and etiology.

Prevalence of conditions.—In general, prevalence of conditions is the estimated number of conditions of a specified type existing at a specified time or the average number existing during a specified interval of time. The prevalence of chronic conditions is defined as the number of chronic cases reported to be present or assumed to be present at the time of the interview; those assumed to be present at the time of the interview are cases described by the respondent in terms of one of the chronic diseases on the "Check List of Chronic Conditions" and reported to have been present at some time during the 12-month period prior to the interview.

Onset of condition.—A condition is considered to have had its onset when it was first noticed. This could be the time the person first felt sick or became injured, or it could be the time when the person or his family was first told by a physician that he had a condition of which he was previously unaware.

Incidence of conditions.—The incidence of conditions is the estimated number of conditions having their onset in a specified time period. As previously mentioned, minor acute conditions involving neither restricted activity nor medical attention are excluded from the statistics. The incidence data shown in some reports are further limited to various subclasses of conditions, such as "incidence of conditions involving bed disability."

Activity-restricting condition.—An activity-restricting condition is a condition which has caused at least 1 day of restricted activity during the 2 calendar weeks before the interview week. (See definition of "Restricted-activity day.") The incidence of acute activity-restricting conditions is estimated from the number of such conditions reported as having started in the 2-week period, but a condition which did not result in restricted activity until after the end of the 2-week period in which it had its onset is not included.

Bed-disabling condition.—A condition involving at least 1 day of bed disability is called a bed-disabling condition. (See definition of "Bed-disability day.") The incidence of acute bed-disabling conditions is defined in a manner analogous to the incidence of acute activity-restricting conditions.

Medically attended condition.—A condition is considered medically attended if a physician has been consulted about it either at its onset or at any time thereafter. Medical attention includes consultation either in person or by telephone for treatment or advice. Advice from the physician transmitted to the patient through the nurse is counted as well as visits to physicians in clinics or hospitals. If during the course of a single visit the physician is consulted about more than one condition for each of several patients, each condition of each patient is counted as medically attended.

Discussions of a child's condition by the physician and a responsible member of the household are considered as medical attention even if the child was not seen at that time.

For the purpose of this definition, the term "physician" includes doctors of medicine and osteopathic physicians.

Terms Relating to Disability

Disability.—Disability is the general term used to describe any temporary or long-term reduction of a person's activity as a result of an acute or chronic condition.

Chronic activity limitation.—Persons with chronic conditions are classified into four categories according to the extent to which their activities are limited at present as a result of these conditions. Since the usual activities of preschool children, school-age children, housewives, and workers and other persons differ, a different set of criteria is used for each group. There

is a general similarity between them, however, as will be seen in the descriptions of the four categories below:

1. *Persons unable to carry on major activity for their group* (major activity refers to ability to work, keep house, or go to school)

Preschool children: inability to take part in ordinary play with other children.

School-age children: inability to go to school.

Housewives: inability to do any housework.

Workers and all other persons: inability to work at a job or business.

2. *Persons limited in the amount or kind of major activity performed* (major activity refers to ability to work, keep house, or go to school)

Preschool children: limited in the amount or kind of play with other children, e.g., need special rest periods, cannot play strenuous games, cannot play for long periods at a time.

School-age children: limited to certain types of schools or in school attendance, e.g., need special schools or special teaching, cannot go to school full time or for long periods at a time.

Housewives: limited in amount or kind of housework, i.e., cannot lift children, wash or iron, or do housework for long periods at a time.

Workers and all other persons: limited in amount or kind of work, e.g., need special working aids or special rest periods at work, cannot work full time or for long periods at a time, cannot do strenuous work.

3. *Persons not limited in major activity but otherwise limited* (major activity refers to ability to work, keep house, or go to school)

Preschool children: not classified in this category.

School-age children: not limited in going to school but limited in participation in athletics or other extracurricular activities.

Housewives: not limited in housework but limited in other activities, such as church, clubs, hobbies, civic projects, or shopping.

Workers and all other persons: not limited in regular work activities but limited in other activities, such as church, clubs, hobbies, civic projects, sports, or games.

4. *Persons not limited in activities*

Includes persons with chronic conditions whose activities are not limited in any of the ways described above.

Disability days.—Short-term disability days are classified according to whether they are days of restricted activity, bed-days, or work-loss days. All days of bed disability are, by definition, days of restricted activity. The converse form of this statement is, of course, not true. Days lost from work are also days of restricted activity for the working population. Hence, restricted activity is the most inclusive term used in describing disability days.

Condition-days of restricted activity, bed disability, etc.—Condition-days of restricted activity, bed disability, and so forth are days of the various forms of disability associated with any one condition. Since any particular day of disability may be associated with more than one condition, the sum of days for conditions may add to more than the total number of person-days.

Restricted-activity day.—A day of restricted activity is one on which a person substantially reduces the amount of activity normal for that day because of a specific illness or injury. The type of reduction varies with the age and occupation of the individual as well as with the day of the week or season of the year. Restricted activity covers the range from substantial reduction to complete inactivity for the entire day.

Bed-disability day.—A day of bed disability is one on which a person stays in bed for all or most of the day because of a specific illness or injury. All or most of the day is defined as more than half of the daylight hours. All hospital days for inpatients are considered to be days of bed disability even if the patient was not actually in bed at the hospital.

Work-loss day.—A day lost from work is a normal working day on which a person did not work at his job or business because of a specific illness or injury. If the person's regular workday is less than a whole

day and the entire workday was lost, it would be counted as a whole workday lost. The number of days lost from work is determined only for persons 17 years of age or over who reported that at any time during the 2-week period covered by the interview they either worked at or had a job or business. (See "Currently employed persons.")

Person-days of restricted activity, bed disability, etc.—Person-days of restricted activity, bed disability, and so forth are days of the various forms of disability experienced by any one person. The sum of days for all persons in a group represents an unduplicated count of all days of disability for the group.

Terms Relating to Persons Injured

Injury condition.—An injury condition, or simply an injury, is a condition of the type that is classified according to the nature of injury code numbers (N800-N999) in the International Classification of Diseases. In addition to fractures, lacerations, contusions, burns, and so forth, which are commonly thought of as injuries, this group of codes includes: effects of exposure, such as sunburn; adverse reactions to immunization and other medical procedures; and poisonings. Unless otherwise specified, the term injury is used to cover all of these.

Since a person may sustain more than one injury in a single accident, e.g., a broken leg and laceration of the scalp, the number of injury conditions may exceed the number of persons injured.

Statistics of acute injury conditions include only those injuries which involved at least 1 full day of restricted activity or medical attendance.

Person injured.—A person injured is one who has sustained one or more injuries in an accident or in some type of nonaccidental violence. (See definition of "Injury condition" above.) Each time a person is involved in an accident or in nonaccidental violence causing injury that results in at least 1 full day of restricted activity or medical attention, he is included in the statistics as a separate "person injured"; hence, one person may be included more than once.

The number of persons injured is not equivalent to the number of "accidents" for several reasons: (1) the term "accident" as commonly used may not involve injury at all; (2) more than one injured person may be involved in a single accident so that the number of accidents resulting in injury would be less than the number of persons injured in accidents; and (3) the term "accident" ordinarily implies an accidental origin, whereas "persons injured" as used in the National Health Survey includes persons whose injury resulted from certain nonaccidental violence.

The number of persons injured in a specified time interval is always equal to or less than the incidence of injury conditions, since one person may incur more than one injury in a single accident.

Terms Relating to Class of Accident

Class of accident.—Injuries, injured persons, and resulting days of disability may be grouped according to class of accident. This is a broad classification of the types of event which resulted in persons being injured. Most of these events are accidents in the usual sense of the word, but some are other kinds of mishap, such as overexposure to the sun or adverse reactions to medical procedures, and others are nonaccidental violence, such as attempted suicide. The classes of accidents are: (1) moving motor-vehicle accidents, (2) accidents occurring while at work, (3) home accidents, and (4) other accidents. These categories are not mutually exclusive. For example, a person may be injured in a moving motor-vehicle accident which occurred while the person was at home or at work. The accident class "motor vehicle" includes "home-motor vehicle" and "while at work-motor vehicle." Similarly, the classes while at work and home include duplicated counts, e.g., motor vehicle-while at work is included under "while at work."

Motor-vehicle accident.—The class of accident is "motor vehicle" if a motor vehicle was involved in any way. Thus, it is not restricted to moving motor vehicles or to persons riding in motor vehicles. A motor vehicle is any mechanically or electrically powered device, not operated on rails, upon which or by which any person or property may be transported or drawn upon a land highway. Any object, such as a trailer, coaster, sled, or wagon, being towed by a motor vehicle is considered a part of the motor vehicle. Devices used solely for moving persons or materials within the confines of a building and its premises are not counted as motor vehicles.

Moving motor vehicle.—The accident is classified as "moving motor vehicle" if at least one of the motor vehicles involved in the accident was moving at the time of the accident. This category is subdivided into "traffic" and "nontraffic."

Moving motor-vehicle traffic accident.—The accident is classified as "traffic" if it occurred on a public highway. It is considered to have occurred on the highway if it occurred wholly on the highway, if it originated on the highway, if it terminated on the highway, or if it involved a vehicle partially on the highway. A public highway is the entire width between boundary lines of every way or place of which any part is open to the use of the public for the purposes of vehicular traffic as a matter of right or custom.

Moving motor-vehicle nontraffic accident.—The accident is classified as "nontraffic" if it occurred entirely in any place other than a public highway.

Nonmoving motor vehicle.—The accident is classified as "nonmoving motor vehicle" if the motor vehicle was not moving at the time of the accident.

Accident while at work.—The class of accident is "while at work" if the injured person was 17 years of age or over and was at work at a job or a business at the time the accident happened.

Home accident.—The class of accident is "home" if the injury occurred either inside the house or outside the house. "Outside the house" refers to the yard, buildings, and sidewalks on the property. "Home" includes not only the person's own home but also any other home in which he might have been when he was injured.

Other.—The class of accident is "other" if the occurrence of injury cannot be classified in one or more of the first three class-of-accident categories (i.e., moving motor vehicle, while at work, or home). This category therefore includes persons injured in public places (e.g., tripping and falling in a store or on a public sidewalk), and also nonaccidental injuries such as homicidal and suicidal attempts. The survey does not cover the military population, but current disability of various types resulting from prior injury occurring while the person was in the Armed Forces is covered and is included in this class. The class also includes mishaps for which the class of accident could not be ascertained.

Terms Relating to Hospitalization

Hospital discharge.—A hospital discharge is the completion of any continuous period of stay of one or more nights in a hospital as an inpatient, except the period of stay of a well, newborn infant. A hospital discharge is recorded whenever a present member of the household is reported to have been discharged from a hospital in the 12-month period prior to the interview week. (Estimates were based on discharges which occurred during the 6-month period prior to the interview.)

Hospital episode.—A hospital episode is any continuous period of stay of one or more nights in a hospital as an inpatient, except the period of stay of a well, newborn infant. A hospital episode is recorded for a family member whenever any part of his hospital stay is included in the 12-month period prior to the interview week.

Hospital.—For this survey a hospital is defined as any institution meeting one of the following criteria: (1) named in the listing of hospitals in the current Guide Issue of *Hospitals*, the Journal of the American Hospital Association; (2) named in the listing of hospitals in the Directories of the American Osteopathic Hospital Association; or (3) named in the annual inventory of hospitals and related facilities submitted by the States to the Division of Hospital and Medical Facilities of the U.S. Public Health Service in conjunction with the Hill-Burton program.

Hospital ownership.—Hospital ownership is a classification of hospitals according to the type of organization that controls and operates the hospital. The category to which an individual hospital is assigned and the definition of these categories follows the usage of the American Hospital Association.

Type of hospital service.—Type of hospital service is a classification of hospitals according to the predominant type of cases for which they provide care. The category to which an individual hospital is assigned and the definition of these categories follows the usage of the American Hospital Association.

Short-stay hospital.—A short-stay hospital is one for which the type of service is general; maternity; eye, ear, nose, and throat; children's; osteopathic hospital; or hospital department of institution.

Hospital day.—A hospital day is a day on which a person is confined to a hospital. The day is counted as a hospital day only if the patient stays overnight. Thus, a patient who enters the hospital on Monday afternoon and leaves Wednesday noon is considered to have had two hospital days.

Hospital days during the year.—The number of hospital days during the year is the total number for all hospital episodes in the 12-month period prior to the interview week. For the purposes of this estimate, episodes overlapping the beginning or end of the 12-month period are subdivided so that only those days falling within the period are included.

Terms Relating to Physician Visits

Physician visit.—A physician visit is defined as consultation with a physician, in person or by telephone, for examination, diagnosis, treatment, or advice. The visit is considered to be a physician visit if the service is provided directly by the physician or by a nurse or other person acting under a physician's supervision. For the purpose of this definition "physician" includes doctors of medicine and osteopathic physicians. The term "doctor" is used in the interview, rather than "physician," because of the need to keep to popular usage. However, the concept toward which all instructions are directed is that which is described here.

Physician visits for services provided on a mass basis are not included in the tabulations. A service received on a mass basis is defined as any service involving only a single test (e.g., test for diabetes) or a single procedure (e.g., smallpox vaccination) when this single service was administered identically to all persons who were at the place for this purpose. Hence, persons passing through a tuberculosis chest X-ray trailer, by this definition, are not included as physician visits. However, a special chest X-ray given in a physician's office or an outpatient clinic is considered a physician visit.

Physician visits to hospital inpatients are not included.

If a physician is called to the house to see more than one person, the call is considered a separate physician visit for each person about whom the physician was consulted.

A physician visit is associated with the person about whom the advice was sought, even if that person did not actually see or consult the physician. For example, if a mother consults a physician about one of her children, the physician visit is ascribed to the child.

Interval since last physician visit.—The interval since the last physician visit is the length of time prior to the week of interview since a physician was last consulted in person or by telephone for treatment or advice of any type whatever. A physician visit to a hospital inpatient may be counted as the last time a physician was seen.

Demographic Terms

Age.—The age recorded for each person is the age at last birthday. Age is recorded in single years and grouped in a variety of distributions depending upon the purpose of the table.

Currently employed persons.—Currently employed persons are all persons 17 years of age or over who reported that at any time during the 2-week period covered by the interview they either worked at, or had a job or business. Current employment includes paid work as an employee of someone else, self-employment in business, farming, or professional practice, and unpaid work in a family business or farm. Persons who were temporarily absent from their job or business because of a temporary illness, vacation, strike, or bad weather are considered as currently employed if they expected to work as soon as the particular event causing their absence no longer existed.

Free-lance workers are considered as currently employed if they had a definite arrangement with one or

more employers to work for pay according to a weekly or monthly schedule, either full time or part time. Excluded from the currently employed are such persons who have no definite employment schedule but work only when their services are needed.

Also excluded from the currently employed population are (1) persons receiving revenue from an enterprise in whose operation they did not participate, (2) persons doing housework or charity work for which they receive no pay, and (3) seasonal workers during the portion of the year they were not working, (4) persons who were not working, even though having a job or business, but were on layoff or looking for work.

The number of currently employed persons estimated by the National Health Survey (NHS) will differ from the estimates prepared by the Current Population Survey (CPS), Bureau of the Census, for several reasons. In addition to sampling variability they include three primary conceptual differences, namely: (1) NHS estimates are for persons 17 years of age or over; CPS estimates are for persons 14 years of age or over. (2) NHS uses a 2-week-reference period, while CPS uses a 1-week-reference period. (3) NHS is a continuing survey with separate samples taken weekly, while CPS is a monthly sample taken for the survey week which includes the 12th of the month.

Terms Relating to Cigarette Smoking

Never smoked.—A person was defined as having never smoked cigarettes if he reported that he had not smoked 100 cigarettes during his entire life.

Present smoker.—A person is defined as presently smoking if he was smoking cigarettes at the time of the interview.

Former smoker.—A person is defined as a former smoker if he had smoked at least 100 cigarettes during his entire life, but was not smoking cigarettes at the time of the interview.



APPENDIX III

SUMMARY OF CHANGES ON HEALTH INTERVIEW SURVEY QUESTIONNAIRE

Introduction

As of July 1, 1967, the Health Interview Survey completed the first 10-year cycle of data collection. In accordance with a long-range plan set up during the early years of the survey, a general evaluation of the design and format of the survey was undertaken. As a result of this evaluation, major revision of the survey procedure was introduced as of July 1, 1967. However, because of the experimental nature of this revision, it was decided, for methodological purposes, to split the Health Interview Survey sample into two separate samples, both of which were intended to measure the health characteristics of the civilian, noninstitutional population of the United States. The procedures used during the previous 10 years were continued in one of these samples, while the revised procedures were adopted in the other sample. This split-sample technique was continued for the 12-month period ending in June 1968.

The Division of Health Interview Statistics is in the process of preparing a detailed report which will evaluate the effect of these new procedures on the statistics compiled by this Division. However, since the data presented in this report were collected by using both of these procedures, the following discussion is intended to summarize the purpose of the revision and to describe the differences between the two procedures.

Background

During the first 10 years of the Health Interview Survey, the questionnaires employed to collect morbidity and health-related data have undergone numerous content and format changes. New supplementary topics are included on the questionnaires each year and are usually continued for only 1 or 2 years. However, there are a number of morbidity and disability measures which have been used throughout the entire 10-year existence of the survey. Some modifications in the collection procedures for these topics have been made when there was sufficient evidence that a change would result in an improvement in the quality of the data obtained. However, the basic philosophy as it related to these continuous topics was to obtain comparable data from year to year.

Continuous items included demographic information such as age, sex, and race, and health-related

topics, e.g., prevalence of all chronic conditions, incidence of acute conditions, number of short-term disability days (restricted activity, bed-days, and time loss from work or school) on both a person and a condition basis, number of persons with limitation of activity according to degree of limitation and condition(s) causing this limitation, and the number of hospitalizations with related hospital information.

The changes introduced in the Health Interview Survey potentially affect the estimates obtained for all of the above health-related items with the exception of the information relating to hospitalization. The procedure used in eliciting health data during the first 10 years of the survey is referred to in this discussion as the condition approach.

Condition Approach

In accordance with the condition approach, the questionnaire was designed to elicit reports of all acute conditions experienced during the 2-week period prior to the week of interview and all chronic conditions present during the previous 12 months. The method employed to obtain reports of these conditions consisted of a series of probe questions designed to elicit specific conditions. The questions, designed primarily to encourage the reporting of acute conditions, were concerned with sickness, accidents, or the utilization of medicine during the 2 weeks preceding the interview. (See questions 8-11, appendix IV.)

Although some chronic conditions were reported in answer to the acute conditions probes, the primary source for the estimated prevalence of chronic conditions was a checklist of specific chronic conditions and impairments (see cards A and B in appendix IV) which were read to the respondent in order to determine whether any family member had had any of the listed conditions during the past 12 months. To elicit information on any other conditions not included on the checklist, a more general question was asked. "Do you have any other ailments, conditions, or problems with your health?" Any conditions reported in response to this question were also recorded.

Additional detailed questions were then asked about each condition reported in response to the probe questions. These additional questions were aimed at obtaining the best diagnostic description of the condition,

at determining if the condition was medically attended, and at obtaining information on the number of short-term disability days (restricted activity, bed-days, time loss from work or school) and the onset of this condition.

For all persons who reported one or more chronic conditions, information was obtained about the presence of any long-term activity limitation, the degree of limitation, and the chronic condition causing it.

This information was then used to describe both the condition and the person, with the following types of data produced:

Incidence of acute conditions.—This statistic was derived from all nonchronic conditions with onset in the 2 weeks before the interview which were reported to have been medically attended and/or which caused the person to restrict his usual activity for at least a day.

Number of condition days of disability.—The volume of condition days of disability (restricted-activity days, bed-days, days lost from work or school) could be produced for each of the condition categories obtained.

Number of person days of disability.—By eliminating any duplication of disability from the condition days for a given person at the time of interview it was possible to produce the volume of person days of disability. The interviewers were instructed to probe for duplication of disability days when two or more disabling conditions were reported and to footnote circumstances in this situation.

Number of chronic conditions.—Theoretically, the total prevalence of all chronic conditions was obtained; this includes those conditions appearing on the chronic conditions checklist and all other conditions which have been present for 3 months or more. However, because of the underreporting problems in chronic-condition data, which will be discussed later, the Division of Health Interview Statistics has restricted publication of these data to:

1. Selected chronic conditions for which the magnitude of the estimate is large enough to make meaningful relative comparisons between population groups, even if the total prevalence estimate might have limited reliability.
2. Chronic conditions which cause long-term limitation of the person's activity.

Number of persons with limitation of activity according to degree of limitation.—In addition to providing statistics on chronic conditions causing limitation, data from the Health Interview Survey provide prevalence estimates on the number of persons with limitation of activity according to three degrees of limitation: (1) unable to carry on major activity (working, keeping house, going to school), (2) able to perform major

activity but limited in the amount or kind of activity, (3) not limited in major activity but limited in other activities.

Limitations of Condition Approach

Considerable resources have been employed by the Division of Health Interview Statistics to evaluate and develop new techniques to improve the quality of the chronic-condition data obtained through the household interview. As stated earlier, estimates for selected chronic conditions published by this Division can be meaningful when employed to show relative differences between population groups. However, a number of evaluation studies have indicated that a severe underreporting problem is present in these data. There are a number of factors that contribute to the underreporting of conditions in an interview situation. First, the respondent must have knowledge of the condition. This usually requires that the condition is medically diagnosed and that the physician has informed the person of its existence. Second, the respondent must be able to recall it at the time of the interview, and, finally, the respondent must be willing to report this condition to the interviewer. In addition, this process is influenced by such things as the impact of the condition on the person, interval of time since diagnosis, and a number of psychological factors such as a respondent's perceived threat or the social stigma attached to a particular condition.

By the very nature of this process, the interview technique could never be expected to gather reports of all chronic conditions. However, a number of techniques have been developed which can improve the reporting of chronic conditions. For instance, there is evidence to indicate that by increasing the number of questions about a particular condition or making very specific reference to the condition, the probability of a respondent reporting a condition is increased—assuming, of course, that he is aware of its existence.

The Division of Health Interview Statistics decided that restricting the collection of chronic conditions to specific types of conditions—e.g., conditions affecting the digestive system—during a given data-collection year, rather than attempting to obtain estimates of the prevalence of the entire spectrum of chronic conditions both would result in an improvement in the quality of the reporting of these specific conditions and would permit more detailed information about them to be collected. The survey plan calls for the collection of different types of conditions each year, so that within the next 5 or 6 years, information on virtually all chronic conditions will have been obtained.

However, as explained previously, the gathering of information on many other health-related topics is largely dependent on the reporting of conditions. Only if conditions were first reported, were other questions

asked. Therefore, in order to restrict the collection of data on chronic conditions to selected types of conditions, it was necessary to develop an alternate method of collection, one which would produce estimates obtained by the condition approach, for both condition and person disability, for incidence of acute conditions, and for limitation of activity.

Another factor influencing the redesign of the Health Interview Survey questionnaire was the amount of interview time used in the condition approach to collect condition information which was never published. Since only certain types of chronic-condition data were published, the detailed information for a large number of conditions was never used. Furthermore, approximately 38 percent of all acute conditions reported in the interview were deleted in the coding process because they failed to meet the severity criteria of medical attention or disability.

In summary, the new format was intended to (1) improve the collection of chronic-condition data, (2) reduce the amount of interview time expended to obtain condition data (this time could be used to obtain other statistical data), and (3) continue to provide comparable data in other health measures that are dependent on the condition approach.

Person Approach

The redesign of the Health Interview Survey procedures, referred to in the following discussion as the person approach, was developed during the 2 years prior to its inception in July 1967. The developmental process included the design of alternate questionnaire and interview procedures which were tested in a series of pretests and evaluation studies. These small pretests and evaluation studies indicated that the person approach was feasible as a household-interview technique. However, the measurement of the effect this change will have on the estimates produced by the

Health Interview Survey will depend primarily on the analysis of the split sample used during the 12-month period of July 1967-June 1968.

With the decision to modify the collection procedure for chronic conditions by restricting it to specific types of conditions during a given year, it was necessary to develop a procedure which would provide comparable data for the other morbidity measures that had previously been obtained by the condition approach.

The most obvious alternative to the condition approach, which produced a base of total conditions from which person data could be generated, was to build a person-data foundation and then generate the condition information. In the person approach, questions are asked to determine if the person had been limited in his activity or had suffered any disability or if he had received medical attention during the 2 weeks prior to the week of the interview. If a person was limited in his activity, had some short-term disability days, or has sought medical attention, the condition or conditions causing these phenomena were then obtained. (See appendix V for a copy of the questionnaire.)

With this approach, it was possible to obtain an unduplicated measure of person-disability days, incidence of acute conditions (exclusive of those minor acute conditions which were deleted in the condition approach because they failed to meet the established severity criteria), degree of limitation of activity, and the chronic conditions causing the limitation. To obtain the number of condition days of disability, it was necessary to ask the disability-day questions for each specific condition reported.

These measures are conceptually similar under both approaches. However, the change in the procedures can be expected to reflect some change in the estimates produced. A more detailed analysis of these procedural changes and their effect on the Health Interview Survey data will be presented in a methodological report currently being prepared.



APPENDIX IV. QUESTIONNAIRE—CONDITION APPROACH

The items below show the exact content and wording of the basic questionnaire used in the nationwide household survey of the U.S. National Health Survey. The actual questionnaire is designed for a household as a unit and includes additional spaces for reports on more than one person, condition, accident, or hospitalization. Such spaces are omitted in this illustration.

| | |
|--|--|
| NOTICE - All information which would permit identification of the individual will be held in strict confidence, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to others for any purposes. | |
| Form NHS-HIS-1 (FY67) REVISED 9-30-66 Budget Bureau No. 68-R1600 Approval Expires 3-31-68 | |
| U.S. DEPARTMENT OF COMMERCE—BUREAU OF THE CENSUS ACTING AS COLLECTING AGENT FOR THE U.S. PUBLIC HEALTH SERVICE U.S. HEALTH INTERVIEW SURVEY | |
| 23.3:1 Book of Books | |
| 2a. STREET ADDRESS <i>House No., Street, Apt. No. or other ident.</i> _____ _____ _____ City _____ State _____ Zip Code _____ | 2b. MAILING ADDRESS <i>If different from 2a</i> <input type="checkbox"/> Same as 2a City _____ State _____ Zip Code _____ |
| 3. <input type="checkbox"/> Ask → WHEN WAS THIS STRUCTURE ORIGINALLY BUILT? <input type="checkbox"/> Do Not Ask Item 3 <input type="checkbox"/> Before 4-1-60 - Continue interview <input type="checkbox"/> After 4-1-60 - Go to Q. 30c, ask if required, and end interview. | 2c. SPECIAL DWELLING PLACE - Name and Sample Number Name _____ Sample No. _____ |
| 10. <input type="checkbox"/> Do Not Ask Item 10 - Go to Item 1 a. <input type="checkbox"/> Ask: ARE THERE ANY OCCUPIED OR VACANT LIVING QUARTERS BESIDES YOUR OWN IN THIS BUILDING? <input type="checkbox"/> Yes - Fill Table A <input type="checkbox"/> No b. <input type="checkbox"/> Ask: ARE THERE ANY OCCUPIED OR VACANT LIVING QUARTERS BESIDES YOUR OWN ON THIS FLOOR? <input type="checkbox"/> Yes - Fill Table A <input type="checkbox"/> No c. <input type="checkbox"/> Ask: IS THERE ANY OTHER BUILDING ON THIS PROPERTY FOR PEOPLE TO LIVE IN - EITHER OCCUPIED OR VACANT? <input type="checkbox"/> Yes - Fill Table A <input type="checkbox"/> No | 4. SAMPLE Circle One B-38 B-39 B-40 B-41 B-42 B-43 4b. PSU Write in and mark _____ 5a. SEGMENT NUMBER Write in and mark _____ b. SEG. TYPE Circle → A B P LSDP 6. SERIAL NUMBER Write in and mark _____ |
| 11. DO YOU OWN OR RENT THIS PLACE? <input type="checkbox"/> Own - Ask 12a <input type="checkbox"/> Rent - Ask 12b <input type="checkbox"/> Rent Free - Ask 12a | 7. SPECIAL DWELLING PLACE - Type and Code Mark type code Type _____ Code _____ |
| 12a. DOES THIS PLACE HAVE 10 OR MORE ACRES? <input type="checkbox"/> Yes - Ask 12c b. DOES THE PLACE YOU RENT HAVE 10 OR MORE ACRES? <input type="checkbox"/> No - Ask 12d c. DURING THE PAST 12 MONTHS DID SALES OF CROPS, LIVESTOCK, AND OTHER FARM PRODUCTS FROM THIS PLACE AMOUNT TO \$50 OR MORE? <input type="checkbox"/> Yes (2) <input type="checkbox"/> No (4) d. DURING THE PAST 12 MONTHS DID SALES OF CROPS, LIVESTOCK, AND OTHER FARM PRODUCTS FROM THIS PLACE AMOUNT TO \$250 OR MORE? <input type="checkbox"/> Yes (3) <input type="checkbox"/> No (5) | 8. NONINTERVIEW REASON If "Other" is marked describe in footnote space. Type A _____ Type B _____ Type C _____ |
| 13. HOW MANY ROOMS ARE IN THIS -- (UNIT)? COUNT THE KITCHEN BUT NOT THE BATHROOM. Write in and mark _____ Total Rooms _____ | 9. TYPE OF LIVING QUARTERS Mark one circle Housing Unit _____ Other Unit _____ |
| 14. HOW MANY BEDROOMS ARE IN THIS -- (UNIT)? If "None" describe in footnotes Write in and mark _____ No. of Bedrooms _____ | 12e. LAND USAGE Mark code from Item 1, or 12c or 12d |
| 15. WHAT IS THE TELEPHONE NUMBER HERE? Write in and mark _____ | 12f. LAND USAGE |
| 16. INTERVIEWER CHECK ITEM: Check questions 22a-22d & 23c on pages 1 & 5. Is a Home Care Supplement required? <input type="checkbox"/> Yes - Fill Home Care Supplement <input type="checkbox"/> No - Leave Thank You Letter and depart | 17. RECORD OF CALLS AT HOUSEHOLD DATE AND TIME OF CALL Date _____ Time _____ LENGTH OF INTERVIEW Minutes _____ |
| 20a. NAME OF OBSERVER <i>If 20b marked "1" or "2"</i> _____ | 18. NUMBER OF CALLS AT HOUSEHOLD Mark from item 17 19. DATE OF COMPLETION Enter from item 17 Month _____ Day _____ |
| 21a. INTERVIEWER NAME <i>Write-in</i> _____ | 20b. WAS THIS INTERVIEW OBSERVED? Yes No _____ |
| FOOTNOTES | 21b. INTERVIEWER NUMBER _____ |
| 22. IDENTIFICATION CODE NO. Mark from tab of Segment folder | 23. REGIONAL OFFICE NUMBER _____ |
| 23. REGIONAL OFFICE NUMBER | WASHINGTON USE Book Number See item 1 Total Number of Conditions this H.H. _____ Total Number of Hospitalizations this H.H. _____ Total Number of Doctor Visits this H.H. _____ Total Number of Persons this H.H. _____ Total Persons Requiring Home Care this Household _____ |

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|---|--|--|--------------|-----|
| 1a. WHAT IS THE NAME OF THE HEAD OF THIS HOUSEHOLD? b. WHAT ARE THE NAMES OF ALL OTHER PERSONS WHO LIVE HERE? <i>List all</i> Yes No c. I HAVE LISTED <i>read names</i> . IS THERE ANYONE ELSE STAYING HERE NOW? <input type="checkbox"/> <input type="checkbox"/> d. HAVE I MISSED ANYONE WHO <u>USUALLY</u> LIVES HERE BUT IS NOW AWAY FROM HOME? <i>Apply household membership rules</i> <input type="checkbox"/> <input type="checkbox"/> e. DO ANY OF THE PEOPLE IN THIS HOUSEHOLD HAVE A HOME ANYWHERE ELSE? <input type="checkbox"/> <input type="checkbox"/> f. ARE ANY OF THE PERSONS IN THIS HOUSEHOLD ON FULL - TIME ACTIVE DUTY IN THE ARMED FORCES? Yes No <i>If "yes", delete</i> <input type="checkbox"/> <input type="checkbox"/> | First Name 01 | First Name 02 | | |
| | Last Name | Last Name | | |
| | Relationship | Age | Relationship | Age |
| | HEAD | | | |
| 2. HOW IS -- RELATED TO (head of household)? | | | | |
| 3. PERSON NUMBER <i>First column should have person 01, second column person 02, etc.</i> | Per. No. | Per. No. | | |
| 4a. HOW OLD WAS -- ON HIS LAST BIRTHDAY <i>Write in next to "relationship" and mark</i> | Age | Age | | |
| b. SEX <i>Mark without asking unless sex is not obvious from name</i> | Male Female | Male Female | | |
| c. RACE <i>Mark without asking</i> | White Negro Other | White Negro Other | | |
| <i>If 17 years old or over, ask:</i> 5. IS -- NOW MARRIED, WIDOWED, DIVORCED, SEPARATED, OR NEVER MARRIED? | Mar. Wid. Div. Sep. N.W. Und. 17 | Mar. Wid. Div. Sep. N.W. Und. 17 | | |
| <i>If 17 years old or over, ask:</i> 6. WHAT WAS -- DOING MOST OF THE PAST 12 MONTHS -- <i>(for males) WORKING OR DOING SOMETHING ELSE?</i> <i>(for females) KEEPING HOUSE, WORKING OR DOING SOMETHING ELSE?</i> | WK KH SE Under 17 V | WK KH SE Under 17 V | | |
| <i>If "SE" marked in Q. 6 and person is 45 years old or over, ask:</i> 7. IS -- RETIRED? | Yes No V | Yes No V | | |
| H <i>If related persons 19 years old or over are listed in addition to the resp., ask:</i> WE WOULD LIKE TO HAVE ALL ADULTS WHO ARE AT HOME TAKE PART IN THE INTERVIEW. IS YOUR --, ETC., AT HOME NOW? (WOULD YOU PLEASE ASK --, ETC., TO JOIN US?) | Under 19 At home Not home V | Under 19 At home Not home V | | |
| THIS SURVEY COVERS ALL KINDS OF ILLNESSES. THESE FIRST QUESTIONS REFER TO <u>LAST WEEK AND THE WEEK BEFORE</u> , THAT IS, THE 2-WEEK PERIOD OUTLINED IN RED ON THIS CALENDAR. <i>Hand calendar to respondent and ask 8a.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 8a. WAS -- SICK AT ANY TIME LAST WEEK OR THE WEEK BEFORE (THE 2 WEEKS SHOWN ON THAT CALENDAR)? | | | | |
| b. WHAT WAS THE MATTER? | | | | |
| c. DID -- HAVE ANYTHING ELSE DURING THAT 2-WEEK PERIOD? | | | | |
| 9a. <u>LAST WEEK OR THE WEEK BEFORE</u> , DID -- TAKE ANY MEDICINE OR TREATMENT FOR ANY CONDITION (BESIDES . . . WHICH YOU TOLD ME ABOUT)? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| b. FOR WHAT CONDITION? | | | | |
| c. DID -- TAKE ANY MEDICINE FOR ANY OTHER CONDITION? | | | | |
| 10a. <u>LAST WEEK OR THE WEEK BEFORE</u> , DID -- HAVE ANY ACCIDENTS OR INJURIES? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| b. WHAT WERE THEY? | | | | |
| c. DID -- HAVE ANY OTHER ACCIDENTS OR INJURIES DURING THAT 2-WEEK PERIOD? | | | | |
| 11a. DID -- EVER HAVE AN (ANY OTHER) ACCIDENT OR INJURY THAT STILL BOTHERS HIM OR AFFECTS HIM IN ANY WAY? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| b. IN WHAT WAY DOES IT BOTHER HIM? <i>Record present effects.</i> | | | | |
| 12. <i>Open your Flashcard booklet to Card A and read both sides of Card A (A-1, A-2) condition by condition; record in his column any conditions mentioned for the person.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 13. <i>Turn to Card B and read both sides of Card B (B-1, B-2), condition by condition; record in his column any conditions mentioned for the person.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 14a. DOES -- HAVE ANY OTHER AILMENTS, CONDITIONS, OR PROBLEMS WITH HIS HEALTH? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| b. WHAT IS THE CONDITION? <i>Record condition itself if still present; otherwise record present effects.</i> | | | | |
| c. ANY OTHER PROBLEMS WITH HIS HEALTH? | | | | |
| R Q. 8-1-4 | <input type="checkbox"/> Responded for self-entirely <input type="checkbox"/> Responded for self-partly | <input type="checkbox"/> Responded for self-entirely <input type="checkbox"/> Responded for self-partly | | |
| <i>For persons 19 years old or over, show who responded for (or was present during the asking of) Q. 8-1-4. If persons responded for self, show whether entirely or partly. For persons under 19 show who responded for them. If eligible respondent is "at home" but did not respond for self, enter the reason in a footnote.</i> | Person _____ was respondent | Person _____ was respondent | | |

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| <p>15a. HAS -- BEEN IN A HOSPITAL AT ANY TIME SINCE A YEAR AGO? If "Yes," ask: b. HOW MANY TIMES WAS -- IN A HOSPITAL DURING THAT PERIOD?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No Times _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No Times _____ |
| <p>16a. HAS ANYONE IN THE FAMILY BEEN IN A NURSING HOME, CONVALESCENT HOME, REST HOME OR SIMILAR PLACE SINCE A YEAR AGO? If "Yes," ask: b. WHO? For each person reported in 16b ask: c. HOW MANY TIMES WAS -- IN A NURSING HOME OR SIMILAR PLACE DURING THAT PERIOD?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No Times _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No Times _____ |
| <p>17a. WHEN WAS -- BORN? If on or after the date stamped in 15a, ask 17b. Examine ages in question 1 for babies 1 year old or under. For each child 1 year old or under, ask 17a.</p> | Month _____ Day _____ Year _____ | Month _____ Day _____ Year _____ |
| <p>b. WAS -- BORN IN A HOSPITAL? If "Yes" and no hospitalizations entered in his column, enter "1" in 15. If "Yes" and a hospitalization is reported for the mother and baby ask 17c.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>c. IS THIS HOSPITALIZATION INCLUDED IN THE NUMBER YOU GAVE ME FOR --? If "No," correct entry for mother and baby.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>THESE NEXT QUESTIONS ARE ABOUT RECENT VISITS TO OR FROM A MEDICAL DOCTOR. 18. DURING THE PAST 2 WEEKS (THE 2 WEEKS OUTLINED IN RED ON THAT CALENDAR) HOW MANY TIMES HAS -- SEEN A DOCTOR EITHER AT HOME OR AT A DOCTOR'S OFFICE OR CLINIC?</p> | <input type="checkbox"/> None <input type="checkbox"/> None Dr. Visits _____ | <input type="checkbox"/> None <input type="checkbox"/> None Dr. Visits _____ |
| <p>19a. (BESIDES THOSE VISITS) DURING THAT 2 WEEK PERIOD HAS ANYONE IN THE FAMILY BEEN TO A DOCTOR'S OFFICE OR CLINIC FOR SHOTS, X-RAYS, TESTS, OR EXAMINATIONS? If "Yes," ask: b. WHO WAS THIS? Mark "Yes" in person's column. c. ANYONE ELSE? </p> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>For each "Yes" marked, ask: d. HOW MANY TIMES DID -- VISIT THE DOCTOR? EXCLUDE visits made on "mass" basis.</p> | Visits _____ | Visits _____ |
| <p>20a. DURING THAT PERIOD, DID ANYONE IN THE FAMILY GET ANY MEDICAL ADVICE FROM A DOCTOR OVER THE TELEPHONE? If "Yes" ask: b. WHO WAS THE PHONE CALL ABOUT? Mark "Yes" in person's column. c. ANY CALLS ABOUT ANYONE ELSE? </p> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>For each "Yes" marked, ask: d. HOW MANY TELEPHONE CALLS WERE MADE TO GET MEDICAL ADVICE ABOUT --?</p> | Telephone calls to Dr. _____ | Telephone calls to Dr. _____ |
| <p>Visits reported in questions 18-20 for this person. Mark here →</p> | Visits rep'd in Q. 18-20 Go to 21b | Visits rep'd in Q. 18-20 Go to 21b |
| <p>If no visits reported in questions 18-20 Ask: 21a. ABOUT HOW LONG HAS IT BEEN SINCE -- SAW OR TALKED TO A DOCTOR? Estimate is acceptable. If less than 1 year, mark appropriate circle; if more than 1 year, mark number of whole years.</p> | During past 2 weeks/not previously reported 2 Months - 6 Months 7-11 Months Years 1 2 3 4 5 6 7 8 9 10 11 12 DK Never | During past 2 weeks/not previously reported 2 Months - 6 Months 7-11 Months Years 1 2 3 4 5 6 7 8 9 10 11 12 DK Never |
| <p>If the last visit was within the past 12 months ask: b. IN TOTAL, ABOUT HOW MANY TIMES HAS -- SEEN OR TALKED TO A DOCTOR DURING THE PAST 12 MONTHS?</p> | Times 0 1 2 3 4 5 6 7 8 9 10 11 12 DK None | Times 0 1 2 3 4 5 6 7 8 9 10 11 12 DK None |
| <p>If person is 55 years old or over, ask: THE FOLLOWING QUESTIONS REFER TO DIFFERENT KINDS OF PERSONAL CARE SOME PEOPLE NEED AT HOME:</p> | Under 55 - Stop 55 or over - Ask 22a | Under 55 - Stop 55 or over - Ask 22a |
| <p>22a. DOES -- NEED ANY HELP IN BATHING, DRESSING OR PUTTING ON HIS SHOES?</p> <p>b. DOES -- NEED ANY HELP AT HOME WITH INJECTIONS, SHOTS OR OTHER TREATMENTS?</p> <p>c. DOES -- NEED ANY ONE'S HELP WHEN WALKING UP STAIRS OR GETTING FROM ROOM TO ROOM?</p> <p>d. DOES -- NEED ANY HELP AT ALL IN CARING FOR HIMSELF?</p> | Yes Stop No DK Yes Stop No DK Yes Stop No DK Yes Stop No DK | Yes Stop No DK Yes Stop No DK Yes Stop No DK Yes Stop No DK |
| <p>23a. DURING THE PAST 12 MONTHS, HAS -- RECEIVED ANY CARE AT HOME FROM A NURSE?</p> <p>b. DURING THIS 12 MONTH PERIOD, ABOUT HOW MANY VISITS DID A NURSE MAKE TO CARE FOR --?</p> <p>c. WERE ANY OF THESE VISITS DURING THE PAST 2-WEEKS?</p> | Yes-Ask 23b & c No Stop DK Times 0 1 2 3 4 5 6 7 8 9 10 11 12 Yes No DK | Yes-Ask 23b & c No Stop DK Times 0 1 2 3 4 5 6 7 8 9 10 11 12 Yes No DK |

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| CONDITION NO. 1 | 1. Person number Write in and mark <input style="width: 40px; height: 20px;" type="text"/> | Person number 0 1 2 0 1 2 3 4 5 6 7 8 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Enter person number and "name of condition" and ask question 2. | Name of condition | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ask for all conditions | 2. DID -- EVER AT ANY TIME TALK TO A DOCTOR ABOUT HIS ...? Yes No V O O O | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Examine "Name of condition" entry in Item 1 and mark one box. | <input type="checkbox"/> Accident or injury-Go to 4 <input type="checkbox"/> Condition on Card C-Go to 9 <input type="checkbox"/> Neither Go to 3a. | WASHINGTON USE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If "Doctor talked to", ask: If "Doctor not talked to" record adequate description of condition or illness. | 3a. WHAT DID THE DOCTOR SAY IT WAS? DID HE GIVE IT A MEDICAL NAME? | <table border="1" style="font-size: small;"> <tr><th>Question number</th><th>8</th><th>9</th><th>10</th><th>11</th><th>12</th><th>13</th><th>14</th><th>H</th><th>C</th><th>DV</th><th>HC</th><th>OT</th></tr> <tr><td>Cond.</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> <tr><td>No. of this condition</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>Mark one</td><td colspan="2">Chronic</td><td colspan="10">Acute</td></tr> <tr><td>Total conditions</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>Accident</td><td colspan="2">Yes</td><td colspan="10">No</td></tr> <tr><td>First injury code</td><td colspan="2">0</td><td colspan="10">O</td></tr> <tr><td>Required hospitalization</td><td colspan="2">0</td><td colspan="10">O</td></tr> <tr><td>Other Acc.</td><td colspan="2">T.Mis.</td><td colspan="10">Ch.</td></tr> <tr><td>IC or dum code.</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> <tr><td>Person days of disability</td><td colspan="12">V</td></tr> <tr><td>R.A. }</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> <tr><td>2Wks. B.D. }</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> <tr><td>T.L. }</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> <tr><td>12 Months B.D. }</td><td>0</td><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td><td>0</td></tr> </table> | Question number | 8 | 9 | 10 | 11 | 12 | 13 | 14 | H | C | DV | HC | OT | Cond. | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | No. of this condition | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | Mark one | Chronic | | Acute | | | | | | | | | | Total conditions | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | Accident | Yes | | No | | | | | | | | | | First injury code | 0 | | O | | | | | | | | | | Required hospitalization | 0 | | O | | | | | | | | | | Other Acc. | T.Mis. | | Ch. | | | | | | | | | | IC or dum code. | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | Person days of disability | V | | | | | | | | | | | | R.A. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 2Wks. B.D. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | T.L. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 12 Months B.D. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 |
| Question number | 8 | 9 | 10 | 11 | 12 | 13 | 14 | H | C | DV | HC | OT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Cond. | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. of this condition | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mark one | Chronic | | Acute | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total conditions | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Accident | Yes | | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| First injury code | 0 | | O | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Required hospitalization | 0 | | O | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other Acc. | T.Mis. | | Ch. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| IC or dum code. | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Person days of disability | V | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| R.A. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2Wks. B.D. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| T.L. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 Months B.D. } | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3b. WHAT WAS THE CAUSE OF ...? <input type="checkbox"/> Accident or injury Go to 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If the entry in 3a or 3b includes the words: Asthma "Ailment" "Disease" Cyst "Attack" "Disorder" Growth "Condition" "Trouble" Measles "Defect" Tumor | 3c. WHAT KIND OF ... IS IT? <i>Ask:</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For ALLERGY OR STROKE, Ask: | 3d. HOW DOES THE ALLERGY (STROKE) AFFECT HIM? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For conditions on Card B-2 and for any entry that includes the words: Abscess Cyst Paralysis Ache (except headache) Growth Sore Bleeding Infection Tumor Blood clot Inflammation Ulcer Boil Neuralgia Weak Cancer Neuritis Weakness Cramps (except menstrual) Pain Palsy | 3e. WHAT PART OF THE BODY IS AFFECTED? <i>Ask:</i> SHOW THE FOLLOWING DETAIL: Ear or eye... one or both Head.....skull, scalp, face Back.....upper, middle, lower Arm.....shoulder, upper, elbow, lower, wrist, hand; one or both Leg.....hip, upper, knee, lower, ankle, foot; one or both | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FILL QUESTIONS 4-8 FOR ALL ACCIDENTS OR INJURIES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4a. DID THE ACCIDENT HAPPEN DURING THE PAST 2 YEARS OR BEFORE THAT TIME? <input type="checkbox"/> During past 2 years-Ask 4b <input type="checkbox"/> Before 2 years-Go to 5a | 4b. WHEN DID THE ACCIDENT HAPPEN? Enter month and year; mark one box Month <input style="width: 40px;" type="text"/> Year <input style="width: 40px;" type="text"/> <input type="checkbox"/> Last week <input type="checkbox"/> Week before <input type="checkbox"/> 2 weeks - 3 months <input type="checkbox"/> 3 - 12 months <input type="checkbox"/> 1 - 2 years | 6a. WAS A CAR, TRUCK, BUS, OR OTHER MOTOR VEHICLE INVOLVED IN THE ACCIDENT IN ANY WAY? Yes No-Go to 7 V O O O | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5a. AT THE TIME OF THE ACCIDENT WHAT PART OF THE BODY WAS HURT? WHAT KIND OF INJURY WAS IT? ANYTHING ELSE? Part(s) of body _____ Kind of injury(injuries) _____ _____ _____ | 5b. WHAT PART OF THE BODY IS AFFECTED NOW? HOW IS HIS -- AFFECTED? Part(s) of body _____ Present effects _____ _____ _____ | 7. WHERE DID THE ACCIDENT HAPPEN? Specify place At home (inside house) O At home (adjacent premises) O Street and highway (includes roadway) O Farm O Industrial place (includes premises) O School (includes school premises) O Place of recreation and sports (not school) O ← Other (specify place where accident happened) V | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 8. WAS -- AT WORK AT HIS JOB OR BUSINESS WHEN THE ACCIDENT HAPPENED? Yes No Under 17 While in Armed Forces V O O O O O | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Footnotes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 0 0 0 0 0 0 0 0 0 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Make no mark in this margin

| HOSPITAL PAGE (CONT'D) | ASK QUESTIONS 8-10 FOR ALL COMPLETED HOSPITALIZATIONS | Mark one circle → | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p><i>Ask if "No" marked in question 4c:</i></p> <p>8. WHAT WAS THE TOTAL AMOUNT OF THE (HOSPITAL/NURSING HOME) BILL FOR THIS STAY? DO NOT INCLUDE DOCTORS' OR SURGEONS' BILLS.</p> <table border="1" style="float: right; margin-left: 20px;"> <tr><th>Dollars</th><th>Cents</th></tr> <tr><td> </td><td> </td></tr> </table> <p>9a. DID (WILL) HEALTH INSURANCE PAY ANY PART OF THIS BILL? <input type="checkbox"/> Yes <input type="checkbox"/> No-Go to 10</p> <p>b. WHAT IS THE NAME OF THE INSURANCE PLAN? →</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Name of Insurance Plan</th><th>Dollars</th><th>Cents</th></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> <p>c. DID (WILL) ANY OTHER HEALTH INSURANCE PLAN PAY PART OF THIS (HOSPITAL/NURSING HOME) BILL?</p> <p style="text-align: center;"><i>If "Yes" Reask 9b</i></p> <p><i>For each Health Insurance Plan named, ask:</i></p> <p>d. WHAT WAS (WILL-BE) THE AMOUNT PAID BY (Name of Plan)?</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Dollars</th><th>Cents</th></tr> <tr><td> </td><td> </td></tr> </table> | Dollars | Cents | | | Name of Insurance Plan | Dollars | Cents | | | | | | | Dollars | Cents | | | <p style="text-align: center;">WASHINGTON USE</p> <p>Tot. Amount</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td></tr> </table> <p>10. Source 1</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th><th>F</th><th>G</th><th>H</th><th>I</th><th>DK</th></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td colspan="10">Amount</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> <p>10. Source 2</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th><th>F</th><th>G</th><th>H</th><th>I</th><th>DK</th></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td colspan="10">Amount</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> <p>10. Source 3</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th><th>F</th><th>G</th><th>H</th><th>I</th><th>DK</th></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td colspan="10">Amount</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> <p>10. Source 4</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>A</th><th>B</th><th>C</th><th>D</th><th>E</th><th>F</th><th>G</th><th>H</th><th>I</th><th>DK</th></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td colspan="10">Amount</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table> | | A | B | C | D | E | F | G | H | I | DK | | | | | | | | | | | Amount | | | | | | | | | | | | | | | | | | | | A | B | C | D | E | F | G | H | I | DK | | | | | | | | | | | Amount | | | | | | | | | | | | | | | | | | | | A | B | C | D | E | F | G | H | I | DK | | | | | | | | | | | Amount | | | | | | | | | | | | | | | | | | | | A | B | C | D | E | F | G | H | I | DK | | | | | | | | | | | Amount | | | | | | | | | | | | | | | | | | | | <p><i>Enter total amount paid by health insurance in line A</i></p> <p><i>Enter ANY amount paid by Social Security Medicare in line B</i></p> <p>10a. WHO PAID (WILL PAY) THE (REMAINDER OF THE) HOSPITAL BILL? Mark each category mentioned</p> <p>b. DID ANY OTHER PERSON OR AGENCY PAY ANY OTHER PART OF THE HOSPITAL BILL?</p> <p><input type="checkbox"/> Yes-Ask 10c <input type="checkbox"/> No-Go to 10d</p> <p>c. WHO WAS THIS? Mark each category mentioned</p> <p>d. WHAT WAS THE AMOUNT PAID BY --?</p> <p style="text-align: center;"><i>Enter amount paid opposite appropriate category.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Dollars</th><th>Cents</th></tr> <tr><td> </td><td> </td></tr> </table> <p>A <input type="checkbox"/> Health insurance - <i>All plans-exclude Medicare</i></p> <p>B <input type="checkbox"/> Social Security Medicare</p> <p>C <input type="checkbox"/> Self and/or Family</p> <p>D <input type="checkbox"/> Relative not in household</p> <p>E <input type="checkbox"/> Friend</p> <p>F <input type="checkbox"/> Kerr Mills or other Fed. Plans</p> <p>G <input type="checkbox"/> Armed Forces Medicare</p> <p>H <input type="checkbox"/> State or Local Welfare Agency</p> <p>I <input type="checkbox"/> Other Specify</p> <p>TOTAL OF ABCDE - include amount paid by health insurance →</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Dollars</th><th>Cents</th></tr> <tr><td> </td><td> </td></tr> </table> | Dollars | Cents | | | Dollars | Cents | | | <p style="text-align: center;">WASHINGTON USE</p> <p>Blank form 1507 <input type="checkbox"/></p> <p>1507 <input type="checkbox"/></p> <p>1508 <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> |
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| <p>ASK QUESTIONS 11 - 13 IF PERSON IS 55 YEARS OLD OR OVER Mark one circle →</p> | | <p>Under 55 - Go to 14 <input type="checkbox"/></p> <p>55 or over - Ask 11a <input type="checkbox"/></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>11a. WHEN -- LEFT (Name of hospital/nursing home), DID HE RETURN HOME OR GO SOME OTHER PLACE?</p> <p><input type="checkbox"/> Home - Go to Question 12</p> <p><input type="checkbox"/> Some other place - Ask Question 11b</p> <p>b. WHAT KIND OF PLACE DID -- GO TO? Specify →</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td></tr> </table> <p>INTERVIEWER:</p> <p><i>If the "Place" in 11b is a Hospital, Nursing Home or a similar place, was a Hospital Page filled for that stay? Mark one box.</i></p> <p><input type="checkbox"/> Hospital page filled-Stop</p> <p><input type="checkbox"/> Hospital page not filled-Fill Hosp. page for unreported stay.</p> | | <p>12. AFTER LEAVING THE (HOSPITAL/NURSING HOME,) HOW MANY DAYS DID -- HAVE TO REMAIN IN BED ALL OR MOST OF THE DAY? Mark entry →</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Days</th><th>DK</th></tr> <tr><td> </td><td> </td></tr> </table> <p style="text-align: right;"><i>Still in bed - Go to 14 <input type="checkbox"/></i></p> | Days | DK | | | <p>13. (ALTOGETHER) HOW MANY DAYS WAS -- CONFINED TO THE HOUSE AFTER RETURNING HOME FROM THE (HOSPITAL/NURSING HOME.)? Mark entry →</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th>Days</th><th>DK</th></tr> <tr><td> </td><td> </td></tr> </table> <p style="text-align: right;"><i>Still confined to house <input type="checkbox"/></i></p> | Days | DK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p>14. NOTE TO INTERVIEWER:</p> <p><i>If the condition in question 5 or 6 is on Card A (A-1, A-2) or B (B-1, B-2) or there is "I" or more nights in question 4b, the condition must have a completed Condition page. If the condition does not have a Condition page, fill one after completing all required Hospital pages.</i></p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td> </td></tr> </table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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DOCTOR VISITS PAGE (1)

See questions 18-21a on Pages 4 and 5

Record each date on which a Doctor was visited in a separate Question 2a of the Doctor Visits Questions.

Ask and record the answer to Question 2b on the last set of Doctor Visits Questions for each person.

1. Person number *Write in and mark* Person number

EARLIER YOU TOLD ME THAT -- HAD SEEN OR TALKED TO A DOCTOR DURING THE PAST 2 WEEKS.

2a. ON WHAT DATES DURING THAT 2-WEEK PERIOD DID -- VISIT OR TALK TO A DOCTOR? Month Day

b. WERE THERE ANY OTHER DOCTOR VISITS FOR -- DURING THAT PERIOD?
 Yes-*Reask Q. 2a* No-*Ask Q. 3-5 for each visit*

Jan Apr July Oct
 Feb May Aug Nov
 Mar June Sept Dec
 LA AB

Item D: Interviewer Check Item

Enter the number of Doctor Visits reported for each person in question 18-21a on pages 4 and 5. If "None" reported for all persons, check here

None reported *Go to Person pages*

| | | | | | | |
|------------|----|----|----|----|----|----|
| Person No. | 01 | 02 | 03 | 04 | 05 | 06 |
| Visits | | | | | | |

Fill one Doctor Visit section for each visit or call reported including additional visits or calls reported in question 2b.

FOOTNOTES:

3. WHERE DID -- SEE THE DOCTOR ON THE (Date)? *Mark one circle*

- Home.....
- Telephone.....
- Doctor's Office.....
- Physician's Office.....
- Hospital Emergency Room.....
- Hospital Outpatient Clinic.....
- Health Department.....
- Company or Industry.....
- Other Specify.....

WASHINGTON USE

4. HOW MUCH WAS THE DOCTOR'S BILL FOR THAT VISIT (CALL)?

If bill not received, ask:

HOW MUCH DO YOU EXPECT THE DOCTOR'S BILL TO BE FOR THAT VISIT (CALL)?

| | |
|---------|-------|
| Dollars | Cents |
| | |

Dollars

Cents

5. IS THE DOCTOR A GENERAL PRACTITIONER OR A SPECIALIST?

General Practitioner Specialist

If "Specialist" ask: WHAT KIND OF SPECIALIST IS HE?

Dum. Code

First Visit?

Kind of Spec.

DOCTOR VISITS PAGE (2)

Record each date on which a Doctor was visited in a separate Question 2a of the Doctor Visits Questions.

Ask and record the answer to Question 2b on the last set of Doctor Visits Questions for each person.

1. Person number *Write in and mark* Person number

EARLIER YOU TOLD ME THAT -- HAD SEEN OR TALKED TO A DOCTOR DURING THE PAST 2 WEEKS.

2a. ON WHAT DATES DURING THAT 2-WEEK PERIOD DID -- VISIT OR TALK TO A DOCTOR? Month Day

b. WERE THERE ANY OTHER DOCTOR VISITS FOR -- DURING THAT PERIOD?
 Yes-*Reask Q. 2a* No-*Ask Q. 3-5 for each visit*

Jan Apr July Oct
 Feb May Aug Nov
 Mar June Sept Dec
 LL AB

FOOTNOTES:

3. WHERE DID -- SEE THE DOCTOR ON THE (Date)? *Mark one circle*

- Home.....
- Telephone.....
- Doctor's Office.....
- Physician's Office.....
- Hospital Emergency Room.....
- Hospital Outpatient Clinic.....
- Health Department.....
- Company or Industry.....
- Other Specify.....

WASHINGTON USE

4. HOW MUCH WAS THE DOCTOR'S BILL FOR THAT VISIT (CALL)?

If bill not received, ask:

HOW MUCH DO YOU EXPECT THE DOCTOR'S BILL TO BE FOR THAT VISIT (CALL)?

| | |
|---------|-------|
| Dollars | Cents |
| | |

Dollars

Cents

5. IS THE DOCTOR A GENERAL PRACTITIONER OR A SPECIALIST?

General Practitioner Specialist

If "Specialist" ask: WHAT KIND OF SPECIALIST IS HE?

Dum. Code

First Visit?

Kind of Spec.

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|-----|---|---|---|---|---------------------|------|---------------------|---|---------------------|---|---------------------|--|---|---|---|---|---|---|---|---|---|---|---|
| <p>Ask for all persons 17 years old or over.</p> <p>24a. WHAT IS THE HIGHEST GRADE (YEAR) -- ATTENDED IN SCHOOL?</p> | Elementary | E I | None - Go to 25a | Under 17 | E I | None - Go to 25a | Under 17 | | | | | | | | | | | | | | | | | | |
| | High school | H i | | | H i | | | | | | | | | | | | | | | | | | | | |
| | College | Co | | | Co | | | | | | | | | | | | | | | | | | | | |
| b. DID -- FINISH THE -- GRADE (YEAR)? | | | Yes | No | Yes | No | | | | | | | | | | | | | | | | | | | |
| <p>Ask for all persons 17 years old or over.</p> <p>25a. DID -- WORK AT ANY TIME LAST WEEK OR THE WEEK BEFORE?</p> <p>For females add: NOT COUNTING WORK AROUND THE HOUSE?</p> | | | Yes - Go to 26a | No - Ask both b and c | Yes - Go to 26a | No - Ask both b and c | | | | | | | | | | | | | | | | | | | |
| b. EVEN THOUGH -- DID NOT WORK DURING THOSE 2 WEEKS, DOES HE HAVE A JOB OR BUSINESS? | | | Yes | No | Yes | No | | | | | | | | | | | | | | | | | | | |
| c. WAS HE LOOKING FOR WORK OR ON LAYOFF FROM A JOB? | | | Yes - Ask d | No - Omit d | Yes - Ask d | No - Omit d | | | | | | | | | | | | | | | | | | | |
| d. WHICH -- LOOKING FOR WORK OR ON LAYOFF FROM A JOB? | | | Looking | Layoff | Both | Looking | Layoff | Both | | | | | | | | | | | | | | | | | |
| <p>If "Yes" in 25c only, questions 26a through 26d apply to this person's LAST full-time civilian job.</p> | <p>Ask for all persons with a "Yes" in 25a, 25b, or 25c.</p> <p>26a. WHO DOES (DID) -- WORK FOR?</p> | | Employer | | Employer | | | | | | | | | | | | | | | | | | | | |
| | b. WHAT KIND OF BUSINESS OR INDUSTRY IS THIS? | | Industry | | Industry | | | | | | | | | | | | | | | | | | | | |
| | c. WHAT KIND OF WORK IS (WAS) -- DOING? | | Occupation | | Occupation | | | | | | | | | | | | | | | | | | | | |
| | <p>Fill 26d from entries in 26a-26c; if not clear, ask.</p> <p>d. CLASS OF WORKER</p> | | Pri.-paid Gov't, Fed. Gov't, Other Own Non-paid Non-worked | Pri.-paid Gov't, Fed. Gov't, Other Own Non-paid Non-worked | Pri.-paid Gov't, Fed. Gov't, Other Own Non-paid Non-worked | Pri.-paid Gov't, Fed. Gov't, Other Own Non-paid Non-worked | | | | | | | | | | | | | | | | | | | |
| <p>Ask for all males 17 years old or over.</p> <p>27a. DID -- EVER SERVE IN THE ARMED FORCES OF THE UNITED STATES?</p> | | | Yes | No - Go to 28 | Yes | No - Go to 28 | | | | | | | | | | | | | | | | | | | |
| b. WAS ANY OF HIS SERVICE DURING A WAR? | | | Yes - Stop | No | DK | Yes - Stop | No | DK | | | | | | | | | | | | | | | | | |
| <p>If "No" or "DK" in 27b ask:</p> <p>c. WAS ANY OF HIS SERVICE BETWEEN JUNE 27, 1950, AND JANUARY 31, 1955?</p> | | | Yes - Stop | No | DK | Yes - Stop | No | DK | | | | | | | | | | | | | | | | | |
| <p>If "No" or "DK" in 27c ask:</p> <p>d. WAS ANY OF HIS SERVICE AFTER JANUARY 31, 1955?</p> | | | Yes | No | DK | Yes | No | DK | | | | | | | | | | | | | | | | | |
| <p>28. WHICH OF THESE INCOME GROUPS REPRESENTS YOUR TOTAL COMBINED FAMILY INCOME FOR THE PAST 12 MONTHS - THAT IS, YOURS, YOUR --S, ETC.? SHOW CARD I. INCLUDE INCOME FROM ALL SOURCES SUCH AS WAGES, SALARIES, SOCIAL SECURITY OR RETIREMENT BENEFITS, HELP FROM RELATIVES, RENTS FROM PROPERTY, AND SO FORTH. Mark income group in each related person's column.</p> | | | A | B | C | D | E | F | G | H | I | J | V | | A | B | C | D | E | F | G | H | I | J | V |
| FOCTNOTES | WASHINGTON USE | | WASHINGTON USE | | WASHINGTON USE | | WASHINGTON USE | | WASHINGTON USE | | WASHINGTON USE | | WASHINGTON USE | | | | | | | | | | | | |
| | *Transcribe codes for Item R (Respondent) | | Respondent | | Respondent | | Respondent | | Respondent | | Respondent | | Respondent | | | | | | | | | | | | |
| | 0 - Self-entirely | | Age of respondent | | Age of respondent | | Age of respondent | | Age of respondent | | Age of respondent | | Age of respondent | | | | | | | | | | | | |
| | 1 - Self-partly | | Family relationship | | Family relationship | | Family relationship | | Family relationship | | Family relationship | | Family relationship | | | | | | | | | | | | |
| | 2 - Spouse | | Education of head | | Education of head | | Education of head | | Education of head | | Education of head | | Education of head | | | | | | | | | | | | |
| | 3 - Mother | | Industry | | Industry | | Industry | | Industry | | Industry | | Industry | | | | | | | | | | | | |
| | 4 - Father | | Occupation | | Occupation | | Occupation | | Occupation | | Occupation | | Occupation | | | | | | | | | | | | |
| | 5 - Other female family member | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 - Other male family member | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 - Other | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---|---|--|--|--|
| <p>Card A</p> <p>A--1 Now I'm going to read a list of conditions--Please tell me if you, your , etc., have had any of these conditions DURING THE PAST 12 MONTHS?</p> <ol style="list-style-type: none"> 1. Asthma? 2. CHRONIC bronchitis? 3. REPEATED attacks of sinus trouble? 4. TROUBLE with varicose veins? 5. Hemorrhoids or piles? 6. Hay fever? 7. Tumor, cyst, or growth? 8. CHRONIC gallbladder or liver trouble? 9. Stomach ulcer? 10. Any other CHRONIC stomach trouble? 11. Kidney stones or CHRONIC kidney trouble? | <p>A--2 Have you, your , etc., had any of these conditions DURING THE PAST 12 MONTHS?</p> <ol style="list-style-type: none"> 12. Thyroid trouble or goiter? 13. Any allergy? 14. CHRONIC nervous trouble? 15. CHRONIC skin trouble? 16. Palsy? 17. Paralysis of any kind? 18. REPEATED trouble with back or spine? 19. Cleft palate? 20. Any speech defect? 21. Hernia or rupture? 22. Prostate trouble? | <p>Card D</p> <p>For: Workers and other persons except Housewives and Children</p> <ol style="list-style-type: none"> 1. Not able to work at all. 2. Able to work but limited in amount of work or kind of work. 3. Able to work but limited in kind or amount of other activities. 4. Not limited in any of the above ways. | <p>Card F</p> <p>For: Children from 6 through 16 years old</p> <ol style="list-style-type: none"> 1. Not able to go to school at all. 2. Able to go to school but limited to certain types of schools or in school attendance. 3. Able to go to school but limited in other activities. 4. Not limited in any of the above ways. | <p>Card H</p> <p>For: Mobility</p> <ol style="list-style-type: none"> 1. Must stay in bed all or most of the time. 2. Must stay in the house all or most of the time. 3. Need the help of another person in getting around inside or outside the house 4. Need the help of some special aid, such as a cane or wheelchair, in getting around inside or outside the house. 5. Does not need the help of another person or a special aid but has trouble in getting around freely. 6. Not limited in any of the above ways. |
| <p>Card B</p> <p>B--1 Have you, your , etc., EVER had any of these conditions?</p> <ol style="list-style-type: none"> 1. Tuberculosis? 2. Emphysema? 3. Hardening of the arteries? 4. High blood pressure? 5. Cancer? 6. Heart trouble? 7. Stroke? 8. Rheumatic fever? 9. Arthritis or rheumatism? 10. Mental illness? 11. Diabetes? 12. Epilepsy? | <p>B--2 Do you, your , etc., HAVE any of these conditions?</p> <ol style="list-style-type: none"> 1. Deafness or SERIOUS trouble hearing with one or both ears? 2. SERIOUS trouble seeing with one or both eyes even when wearing glasses? 3. Missing fingers, hand or arm -- toes, foot or leg? 4. Missing lung or kidney (or breast)? 5. Club foot? 6. PERMANENT stiffness or any deformity of foot, leg, fingers, arm or back? | <p>Card E</p> <p>For: Housewife</p> <ol style="list-style-type: none"> 1. Not able to keep house at all. 2. Able to keep house but limited in amount or kind of housework. 3. Able to keep house but limited in kind or amount of other activities. 4. Not limited in any of the above ways. | <p>Card G</p> <p>For: Children under 6 years old</p> <ol style="list-style-type: none"> 1. Not able to take part at all in ordinary play with other children. 2. Able to play with other children but limited in amount or kind of play 4. Not limited in any of the above ways. | <p>Card I</p> <p>Which of the following income groups represents your total combined family income for the past 12 months? Include income from all sources such as wages, salaries, social security or retirement benefits, help from relatives, rents from property, and so forth.</p> <p>Under \$500 Group A</p> <p>\$500-- \$999 Group B</p> <p>\$1,000-- \$1,999 Group C</p> <p>\$2,000-- \$2,999 Group D</p> <p>\$3,000-- \$3,999 Group E</p> <p>\$4,000-- \$4,999 Group F</p> <p>\$5,000-- \$6,999 Group G</p> <p>\$7,000-- \$9,999 Group H</p> <p>\$10,000-- \$14,999 Group I</p> <p>\$15,000 and over Group J</p> |

APPENDIX V. QUESTIONNAIRE—PERSON APPROACH

The items below show the exact content and wording of the basic questionnaire used in the nationwide household survey of the U.S. National Health Survey. The actual questionnaire is designed for a household as a unit and includes additional spaces for reports on more than one person, condition, accident, or hospitalization. Such spaces are omitted in this illustration.

| NOTICE - All information which would permit identification of the individual will be held in strict confidence, will be used only by persons engaged in and for the purposes of the survey, and will not be disclosed or released to others for any purposes. | | | | | | | | | | BUDGET BUREAU NO. 68-56701.6 APPROVAL EXPIRES JAN. 1, 1968 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------------------|--|---|--|---|---|---|-----------|---|--------------------|---------------|------|---|------|---|------|---|------|---|------|------------------|---------------------|-------|--|-------|--|-------|--|-------|--|-------|--|------------------|-------|--|-------|--|-------|--|-------|--|-------|--|--|------------------|---------------------|-------|--|-------|--|-------|--|-------|--|-------|--|------------------|-------|--|-------|--|-------|--|-------|--|-------|--|---------------------|-------|--|-------|--|-------|--|-------|--|-------|--|------------------|-------|--|-------|--|-------|--|-------|--|-------|-------|
| FORM NHS-HIS-1X (1968) (15-19-67) | | | U.S. DEPARTMENT OF COMMERCE BUREAU OF THE CENSUS ACTING AS COLLECTING AGENT FOR THE U.S. PUBLIC HEALTH SERVICE U.S. HEALTH INTERVIEW SURVEY | | | | | | | 1. Book _____ of _____ Books | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Street Address - House No., Street, Apt. No. or other ident. _____ _____ City _____ State _____ ZIP code _____ | | | | FOR AREA SEGMENTS ENTER: Sheet No. _____ Line No. _____ | | 3. (If marked "Ask" do so before the interview) <input type="checkbox"/> Ask → When was this structure originally built? <input type="checkbox"/> Do not ask <input type="checkbox"/> Before 4-1-60 - <i>Continuo</i> interview <input type="checkbox"/> After 4-1-60 - <i>Go to Q. 13c, ask if required, and end interview</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. Special dwelling place Name _____ Sample No. _____ Type _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Complete items 11-21 and 23 at the end of the interview 11. Mailing address - If different from 2 <input type="checkbox"/> Same as 2 _____ _____ City _____ State _____ ZIP code _____ | | | | Card type X | 5. PSU | 6a. SEG. number | 6b. SEG. type A B P LSDP | 7. Serial number | 8. Sample | 9. R.O. number | 10. I.D. Code | SDP type code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Type of living quarters - Mark appropriate box with an "X" <input type="checkbox"/> Housing unit <input type="checkbox"/> Other unit | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. <input type="checkbox"/> Do not ask Q. 13 Go to Item L | a. <input type="checkbox"/> Ask → Are there any occupied or vacant living quarters besides your own in this building? <input type="checkbox"/> Yes - Fill Table X <input type="checkbox"/> No | | | b. <input type="checkbox"/> Ask → Are there any occupied or vacant living quarters besides your own on this floor? <input type="checkbox"/> Yes - Fill Table X <input type="checkbox"/> No | | | c. <input type="checkbox"/> Ask → Is there any other building on this property for people to live in - either occupied or vacant? <input type="checkbox"/> Yes - Fill Table X <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ITEM L <input type="checkbox"/> Rural - Ask Items 14 and 15 | <input type="checkbox"/> All other - Go to 16 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. Do you own or rent this place? <input type="checkbox"/> Own - Ask 15a <input type="checkbox"/> Rent - Ask 15b <input type="checkbox"/> Rent free - Ask 15a | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15a. (Own or rent free) Does this place have 10 or more acres? <input type="checkbox"/> Yes - Ask c <input type="checkbox"/> No - Ask d | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. (Rent) Does the place you rent have 10 or more acres? c. During the past 12 months did sales of crops, livestock, and other farm products from the place amount to \$50 or more? 2 <input type="checkbox"/> Yes 4 <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. During the past 12 months did sales of crops, livestock, and other farm products from the place amount to \$250 or more? 3 <input type="checkbox"/> Yes 5 <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. How many rooms are in this - - (unit)? Count the kitchen but not the bathroom Total rooms: <input style="width: 50px;" type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. How many bedrooms are in this - - (unit)? If "None" describe in footnotes Number of bedrooms: <input style="width: 50px;" type="text"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. What is the telephone number here? Telephone number: <input style="width: 100px;" type="text"/> 2 <input type="checkbox"/> None | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Motor vehicle accident check box: Review question 27c to determine how many motor vehicle supplements need to be completed. (Fill a separate supplement for each different accident reported) _____ Number of M.V. Accident Supplements Required <input type="checkbox"/> None Enter ending time in item 23 | | | | | 20. Was this interview observed? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Name of Observer: _____ 21. Interviewer's name: _____ Code: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22. Noninterview reason | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TYPE A 0 <input type="checkbox"/> Refusal - Describe in footnotes 1 <input type="checkbox"/> No one at home - repeated calls 2 <input type="checkbox"/> Temporarily absent 3 <input type="checkbox"/> Other - Specify → | | | | TYPE B 0 <input type="checkbox"/> Vacant-non-seasonal 1 <input type="checkbox"/> Vacant-seasonal 2 <input type="checkbox"/> Usual residence elsewhere 3 <input type="checkbox"/> Armed Forces 4 <input type="checkbox"/> Other - Specify → | | | | TYPE C 0 <input type="checkbox"/> Demolished 1 <input type="checkbox"/> In sample by mistake 2 <input type="checkbox"/> Eliminated in sub-sample 3 <input type="checkbox"/> Built after April 1, 1960 4 <input type="checkbox"/> Other - Specify → | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. Record of calls at household | | | | | | | | | | WASH. USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Item</th> <th>1</th> <th>Com.</th> <th>2</th> <th>Com.</th> <th>3</th> <th>Com.</th> <th>4</th> <th>Com.</th> <th>5</th> <th>Com.</th> </tr> </thead> <tbody> <tr> <td rowspan="2" style="font-size: x-small;">Entire household</td> <td style="font-size: x-small;">Date Beginning time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> </tr> <tr> <td style="font-size: x-small;">Date Ending time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> </tr> <tr> <td rowspan="4" style="font-size: x-small;">Record return calls for individual respondents</td> <td style="font-size: x-small;">Person No. _____</td> <td style="font-size: x-small;">Date Beginning time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Date Ending time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Date Beginning time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Date Ending time</td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> <td></td> <td>-----</td> </tr> </tbody> </table> | | | | | | | | | | Item | | 1 | Com. | 2 | Com. | 3 | Com. | 4 | Com. | 5 | Com. | Entire household | Date Beginning time | ----- | | ----- | | ----- | | ----- | | ----- | | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | | Record return calls for individual respondents | Person No. _____ | Date Beginning time | ----- | | ----- | | ----- | | ----- | | ----- | | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | | Date Beginning time | ----- | | ----- | | ----- | | ----- | | ----- | | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | Calls |
| Item | | 1 | Com. | 2 | Com. | 3 | Com. | 4 | Com. | 5 | Com. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Entire household | Date Beginning time | ----- | | ----- | | ----- | | ----- | | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| | | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Date Beginning time | ----- | | ----- | | ----- | | ----- | | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Date Ending time | ----- | | ----- | | ----- | | ----- | | ----- | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Date of Completion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Length | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | Time of day | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FOOTNOTES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|---|
| <p>1a. What is the name of the head of this household? - Enter name in first column b. What are the names of all other persons who live here? - List all persons who live here c. I have listed (Read names.) Is there anyone else staying here now, such as friends, relatives, or roomers? <input type="checkbox"/> Yes* <input type="checkbox"/> No d. Have I missed anyone who USUALLY lives here but is now away from home? <input type="checkbox"/> Yes* <input type="checkbox"/> No e. Do any of the people in this household have a home anywhere else? <input type="checkbox"/> Yes* <input type="checkbox"/> No If any adult males listed, ask: *Apply household membership rules f. Are any of the persons in this household now on full-time active duty with the Armed Forces of the United States? <input type="checkbox"/> Yes-Delete <input type="checkbox"/> No</p> | <p>1a. First name ① Last name</p> |
| <p>2. How is -- related to -- (head of household)?</p> | <p>2. RELATIONSHIP HEAD</p> |
| <p>3. How old was -- on his last birthday? - Also mark Race and Sex</p> | <p>3. AGE RACE SEX 0 <input type="checkbox"/> W 0 <input type="checkbox"/> M 1 <input type="checkbox"/> N 2 <input type="checkbox"/> OT 1 <input type="checkbox"/> F</p> |
| <p>C Record all conditions for a person in this space in the person's column with question number(s) where reported. Also enter the number of Hospitalizations and Doctor Visits. Check the Homecare box, and the No Cut Down Days box, if applicable.</p> | <p>H <input type="checkbox"/> DV <input type="checkbox"/> HC <input type="checkbox"/> No Cut Down Days <input type="checkbox"/> Q. No. Condition</p> |
| <p>- If 17 years old or over, ask: 4. Is -- now married, widowed, divorced, separated, or never married? - Mark one box for each person If person under 17 is or has been married mark the "Und. 17" box and give marital status in a footnote</p> | <p>4. 0 <input type="checkbox"/> Und. 17 6 <input type="checkbox"/> Never married 1 <input type="checkbox"/> Married 4 <input type="checkbox"/> Divorced 3 <input type="checkbox"/> Widowed 5 <input type="checkbox"/> Separated</p> |
| <p>H If related persons 19 years old or over are listed in addition to the respondent, say: We would like to have all adults who are at home take part in the interview. Is your --, your --, etc., at home now? If other eligible respondents are at home, ask: Would you please ask --, --, etc., to join us?</p> | <p>1 <input type="checkbox"/> At home 0 <input type="checkbox"/> Under 19 years 2 <input type="checkbox"/> Not at home</p> |
| <p>HAND CALENDAR TO RESPONDENT 5a. During the past two weeks (the 2 weeks outlined in red on that calendar) did -- stay in bed all or most of the day because of any illness or injury? b. During that two week period, how many days did -- have to stay in bed all or most of the day? c. During that two week period, did he have to cut down on the things he usually does because of illness or injury? d. Did -- have to cut down for as much as a day? e. How many days in total did -- have to cut down during that two week period? f. If 17 years old or over ask: How many days did illness or injury keep -- from work during these two weeks? For females add - Not counting work around the house. If 6-16 years old ask: g. How many days did illness or injury keep -- from school during those two weeks?</p> | <p>5a. <input type="checkbox"/> Yes - Ask b 00 <input type="checkbox"/> No - Ask c b. _____ days - Ask c c. <input type="checkbox"/> Yes - Ask d <input type="checkbox"/> No - Go to 6a d. <input type="checkbox"/> Yes - Ask e 00 <input type="checkbox"/> No - Go to 6a e. _____ days - Ask f or g If under 6 yrs. - Go to 6a f. 00 <input type="checkbox"/> None _____ days - Go to 6a g. 00 <input type="checkbox"/> None _____ days - Go to 6a</p> |
| <p>If 1+ days recorded in Q. 5e, ask: 6a. What condition caused -- to cut down on the things he usually does during the past two weeks? - Enter condition in C above b. During the past two weeks, did any other condition cause him to cut down on the things he usually does?</p> | <p>6a. <input type="checkbox"/> No cut down days Go to next person b. <input type="checkbox"/> Yes - Reask a and b <input type="checkbox"/> No - Go to next person</p> |
| <p>7. During the past 2 weeks (the 2 weeks outlined in red on that calendar) how many times has -- seen a doctor either at home or at a doctor's office, or clinic?</p> | <p>7. <input type="checkbox"/> None _____ Number of visits</p> |
| <p>8a. (Besides those visits) During that 2-week period has anyone in the family been to a doctor's office or clinic for shots, x-rays, tests, or examinations? <input type="checkbox"/> Yes - Ask b and c <input type="checkbox"/> No - Go to 9 b. Who was this? - Mark "Yes" in person's column c. Anyone else? <input type="checkbox"/> Yes - Reask b and c <input type="checkbox"/> No - Go to d For each "Yes" marked, ask: d. How many times did -- visit the doctor during that period? - Exclude visits made on "mass" basis</p> | <p>8a. <input type="checkbox"/> Yes Doctor's visits d. _____ Number of visits</p> |
| <p>9a. During that period, did anyone in the family get any medical advice from a doctor over the telephone? <input type="checkbox"/> Yes - Ask b and c b. If "Yes" ask: Who was the phone call about? - Mark "Yes" in person's column. <input type="checkbox"/> No - Go to 10 c. Any calls about anyone else? <input type="checkbox"/> Yes - Reask b and c <input type="checkbox"/> No - Go to d For each "Yes" marked, ask: d. How many telephone calls were made to get medical advice about --?</p> | <p>9a. <input type="checkbox"/> Yes d. _____ Number of calls</p> |
| <p>If doctor was seen or talked to during the past two weeks, ask: 10a. For what condition did -- see or talk to a doctor during the past two weeks? - Enter condition here and in c above b. During that period, did -- see or talk to a doctor for any other condition? If pregnancy reported ask: During the past 2 weeks was -- sick because of her pregnancy? If "Yes" ask: What was the matter?</p> | <p>10a. <input type="checkbox"/> No 2-week visits - Ask 11 b. <input type="checkbox"/> Yes - Reask 10a <input type="checkbox"/> No - Go to next person</p> |
| <p>If no visits reported in questions 7-9, ask: 11. ABOUT how long has it been since -- saw or talked to a doctor? (Estimate is acceptable. If less than 1 year, check appropriate "Months" box: if more than 1 year, enter number of whole years.)</p> | <p>XV <input type="checkbox"/> 2 week visits in Q. 7-9 OX <input type="checkbox"/> Past 2 weeks not reported Reask Q. 7 and 10 XX <input type="checkbox"/> In hospital in past 2 weeks Ask Q. 10 VO <input type="checkbox"/> 2 weeks - 6 months XO <input type="checkbox"/> Over 6-12 months _____ Years 00 <input type="checkbox"/> Never</p> |

Now I'm going to read a list of conditions:

12a. During the past 12 months, has anyone in the family (you, your --, etc.) had any of the following conditions -- If "Yes," ask b and c

| | Yes | No | | Yes |
|-----------------------------------|-----|----|----|-----|
| 1. Gallstones? | | | 1. | |
| 2. Any other gallbladder trouble? | | | 2. | |
| 3. Hemorrhoids or piles? | | | 3. | |
| 4. Cirrhosis of the liver? | | | 4. | |
| 5. Fatty liver? | | | 5. | |
| 6. Hepatitis? | | | 6. | |
| 7. Yellow jaundice? | | | 7. | |
| 8. Any other liver trouble? | | | 8. | |

a. During the past 12 months, has anyone in the family had -- If "Yes," ask b and c

| | Yes | No | | Yes |
|--|-----|----|-----|-----|
| 9. A disease of the pancreas? | | | 9. | |
| 10. A disease of the esophagus? | | | 10. | |
| 11. Any other disease that affects swallowing? | | | 11. | |
| 12. Peptic ulcer? | | | 12. | |
| 13. Duodenal ulcer? | | | 13. | |
| 14. Stomach or gastric ulcer? | | | 14. | |
| 15. Any other ulcer? | | | 15. | |

a. During the past 12 months, has anyone in the family had -- If "Yes," ask b and c

| | Yes | No | | Yes |
|----------------------------------|-----|----|-----|-----|
| 16. Hiatal hernia? | | | 16. | |
| 17. Umbilical hernia? | | | 17. | |
| 18. Any other hernia or rupture? | | | 18. | |
| 19. Gastritis? | | | 19. | |
| 20. Frequent indigestion? | | | 20. | |
| 21. Cancer of the stomach? | | | 21. | |
| 22. Any other stomach trouble? | | | 22. | |
| 23. Enteritis? | | | 23. | |
| 24. Diverticulitis? | | | 24. | |

a. During the past 12 months, has anyone in the family had -- If "Yes," ask b and c

| | Yes | No | | Yes |
|--|-----|----|-----|-----|
| 25. Colitis? | | | 25. | |
| 26. Constipation or other bowel trouble? | | | 26. | |
| 27. Spastic colon? | | | 27. | |
| 28. Cancer of the colon or rectum? | | | 28. | |
| 29. Any other cancer of the digestive system? | | | 29. | |
| 30. Any other intestinal trouble? | | | 30. | |
| 31. Any other condition of the digestive system? | | | 31. | |

| | | |
|---------------------|--|--|
| Ages 17+ | <p>13a. What was -- doing most of the past 12 months -- (if or mates): working, or doing something else? (For female-): keeping house, working or doing something else?</p> <p>If "something else" and 45+ years of age, ask:</p> <p>b. Is -- retired?</p> <p>If "something else" and under 45 years of age or "no" in Q. 13b, ask:</p> <p>c. What was -- doing?</p> | <p>1 <input type="checkbox"/> Working (18)</p> <p>2 <input type="checkbox"/> Keeping house (18)</p> <p>3 <input type="checkbox"/> Retired (17)</p> <p>4 <input type="checkbox"/> Going to school (20)</p> <p>5 <input type="checkbox"/> 17+ something else (17)</p> <p>6 <input type="checkbox"/> 6-16 something else (19)</p> |
| Ages 6-16 | <p>14a. What was -- doing most of the past 12 months -- going to school or doing something else?</p> <p>If "something else" ask:</p> <p>b. What was -- doing?</p> | |
| Ages 1-5 | <p>15a. In terms of health, is -- able to take part at all in ordinary play with other children?</p> <p>b. Is he limited in the kind or amount of play because of his health?</p> | <p>15a. <input type="checkbox"/> Yes (15b) <input type="checkbox"/> No (21)</p> <p>b. <input type="checkbox"/> Yes (21)</p> <p><input type="checkbox"/> No -- Go to next person</p> |
| Ages Under 1 yr. | <p>16a. Is -- limited in any way because of his health?</p> <p>b. In what way is he limited? -- Specify</p> | <p>16a. <input type="checkbox"/> Yes (16b)</p> <p><input type="checkbox"/> No -- Go to next person</p> |

Go to 21

| | |
|--|---|
| <p>17a. In terms of health, is -- able to work?</p> <p>b. Is -- limited in the kind or amount of work he could do because of his health?</p> | <p>17a. <input type="checkbox"/> Yes (17b) <input type="checkbox"/> No (21)</p> <p>b. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No (18c)</p> |
| <p>18a. Is -- limited in the kind or amount of (work - housework) he can do because of his health?</p> <p>b. Is -- able to (work, keep house) at all?</p> <p>c. Is -- limited in the kind or amount of other activities because of his health?</p> | <p>18a. <input type="checkbox"/> Yes (18b) <input type="checkbox"/> No (18c)</p> <p>b. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No (21)</p> <p>c. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No - Go to next person</p> |
| <p>19. In terms of health, is -- able to go to school?</p> | <p>19. <input type="checkbox"/> Yes (20) <input type="checkbox"/> No (21)</p> |
| <p>20a. Does (would) he have to go to a certain type of school because of his health?</p> <p>b. Is he (would he be) limited in school attendance because of his health?</p> <p>c. Is -- limited in the kind or amount of other activities because of his health?</p> | <p>20a. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No (20b)</p> <p>b. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No (20c)</p> <p>c. <input type="checkbox"/> Yes (21) <input type="checkbox"/> No - Go to next person</p> |
| <p>21a. What condition causes this limitation?</p> <p>b. Is this limitation caused by any other conditions?</p> <p>c. What conditions? - Any other conditions?</p> | <p>21a. _____</p> <p>b. <input type="checkbox"/> Yes (21c) <input type="checkbox"/> No - Go to next person</p> <p>c. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>22a. Has -- been in a hospital at any time since _____ a year ago?</p> <p>b. How many times was -- in a hospital during that period?</p> | <p>22a. <input type="checkbox"/> Yes - Ask b <input type="checkbox"/> No - Go to next person</p> <p>b. _____ Times</p> |
| <p>Examine ages of all persons listed. For each child 1 year old or under, ask:</p> <p>23a. When was -- born? If on or after the date stamped in 22a, ask 23b.</p> <p>b. Was -- born in a hospital? If "Yes" and no hospitalizations entered in his column, enter "1" in 22. If "Yes" and a hospitalization is reported for the mother and baby ask 23c.</p> <p>c. Is this hospitalization included in the number you gave me for -- ? If "No" correct entry for mother and baby.</p> | <p>23a. Month Day Year</p> <p>b. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>c. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>24a. Has anyone in the family been in a nursing home, convalescent home or similar place since _____ a year ago? <input type="checkbox"/> Yes-Ask 24b <input type="checkbox"/> No-Go to 25</p> <p>b. Who was this? - Mark "Yes" in person's column For each "Yes" marked ask:</p> <p>c. During that period, how many times was -- in a nursing home or similar place?</p> | <p>24b. <input type="checkbox"/> Yes</p> <p>c. _____ Times</p> |
| <p>If person is 55 years old or over, ask: The following questions refer to different kinds of personal care some people need at home:</p> <p>25a. Does -- need any help in bathing, dressing or putting on his shoes?</p> <p>b. Does -- need any help at home with injections, shots or other treatments?</p> <p>c. Does -- need anyone's help when walking up stairs or getting from room to room?</p> <p>d. Does -- need any help at all in caring for himself?</p> | <p>0 <input type="checkbox"/> Under 55 - Stop <input type="checkbox"/> 55 or over - Ask a</p> <p>25a. <input type="checkbox"/> Yes - Stop <input type="checkbox"/> No</p> <p>b. <input type="checkbox"/> Yes - Stop <input type="checkbox"/> No</p> <p>c. <input type="checkbox"/> Yes - Stop <input type="checkbox"/> No</p> <p>d. <input type="checkbox"/> Yes - Stop <input type="checkbox"/> No</p> |
| <p>26a. During the past 12 months, has -- received any care at home from a nurse?</p> <p>b. During this 12-month period, about how many visits did a nurse make to care for -- ?</p> <p>c. Were any of these visits during the past 2-weeks?</p> | <p>26a. <input type="checkbox"/> Yes - Ask b & c <input type="checkbox"/> No-Stop</p> <p>b. _____ Times</p> <p>c. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>These next questions are about motor vehicle accidents, that is, accidents involving cars, trucks, buses, motorcycles, and so forth. We are interested in all types of motor vehicle accidents even if no one was injured.</p> <p>27a. During the past 12 months, has -- been in a motor vehicle accident either as a (driver), passenger or pedestrian?</p> <p>b. How many motor vehicle accidents has -- been in during the past 12 months?</p> <p>c. On what date(s) did the accident(s) happen?</p> <p>d. Was -- in any other motor vehicle accident during the past 12 months?</p> | <p>27a. <input type="checkbox"/> Yes - Ask b <input type="checkbox"/> No - Go to next person</p> <p>b. _____ Number of accidents</p> <p>c. Month Day Year</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>d. <input type="checkbox"/> Yes - Reask c and d <input type="checkbox"/> No - Go to next person</p> |

| | | |
|---|---|---|
| Ask question 9a for all conditions. | 9a. During the past two weeks, did his . . . cause him to cut down on the things he usually does? b. Did he have to cut down for as much as a day? | <input type="checkbox"/> Yes <input type="checkbox"/> No - Go to 14a <input type="checkbox"/> Yes <input type="checkbox"/> No - Go to 14a |
| Ask questions 10 and 11 if "Yes" marked in question 9b. | 10. How many days did he have to cut down during that two-week period? 11. During that two-week period, how many days did his . . . keep him in bed all or most of the day? | ____ Days ____ Days <input type="checkbox"/> None |
| Ask question 12 if person is 6-16 years old. | 12. How many days did his . . . keep him from school during that two-week period? | ____ Days <input type="checkbox"/> None |
| Ask question 13 if person is 17 years old or over. | 13. How many days did his . . . keep him from work during that two-week period? (For females add) not counting work around the house? | ____ Days <input type="checkbox"/> None |
| Ask question 14 for all conditions. | 14a. When did he first notice his . . . ? Was it during the past 3 months or before that time? b. Did he first notice it during the past two weeks or before that time? c. Which week, last week or the week before? | 2 <input type="checkbox"/> During 3 months 6 <input type="checkbox"/> Before 3 months - Go to 15 <input type="checkbox"/> Past 2 weeks 3 <input type="checkbox"/> Before 2 weeks - Go to AA 0 <input type="checkbox"/> Last week } Go to AA 1 <input type="checkbox"/> Week before } |
| Ask question 15 only if condition was first noticed "Before 3 months." | 15. Did -- first notice it during the past 12 months or before that time? | 4 <input type="checkbox"/> 3 - 12 months 5 <input type="checkbox"/> Before 12 months |
| AA: Continue if this condition started "Before 3 months" or is in this list: Cancer, any kind Diverticulitis Gallstones Piles Cirrhosis of the liver Enteritis Hemorrhoids Rupture, any kind Colitis Fatty liver Hernia, any kind Spastic colon Ulcer, any kind STOP for all other conditions and for accidents, injuries, and pregnancies. | | |
| <input type="checkbox"/> "Doctor not seen" in question 2 - Ask question 16 <input type="checkbox"/> "Doctor seen" in question 2 - Ask question 17 | | |
| Ask if "Doctor not seen" in question 2. | 16. During the past 12 months what did -- do or take for his . . . ? | Go to 24 |
| Ask if "Doctor seen" in question 2. | 17. Before -- first talked to a doctor about his . . . , what did he do or take for this condition? | |
| | 18. Before -- first talked to a doctor about this condition, what kind of symptoms did he have? | <input type="checkbox"/> None - Go to 20 |
| | 19. About how long did -- have any of these symptoms before he talked to a doctor about them? | ____ day(s) ____ month(s) ____ week(s) ____ year(s) |
| | 20. Does -- take any medicine or treatment which a doctor advised for his . . . ? | 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No |
| | 21. Has -- ever had surgery for . . . ? | 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No |
| | 22. Was -- ever hospitalized for . . . ? | 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No |
| | 23. During the past 12 months about how many times has -- seen or talked to a doctor for this condition? | ____ Times <input type="checkbox"/> None |
| Ask for all conditions past AA. | 24. About how many days during the past 12 months, has his . . . kept him in bed all or most of the day? | ____ Days <input type="checkbox"/> None |
| | 25a. Does his . . . bother him - a great deal, some, very little, or not at all? For "Other" answers: If "not bothered at all" ask b, otherwise go to next condition | <input type="checkbox"/> Great deal } Go to next condition <input type="checkbox"/> Some } <input type="checkbox"/> Very little } <input type="checkbox"/> Not at all - Ask b <input type="checkbox"/> Other |
| | b. Does -- still have this condition? | 1 <input type="checkbox"/> Yes - Go to next person <input type="checkbox"/> No - Ask c |
| | c. Is this condition completely cured or is it under control? | <input type="checkbox"/> Cured-As/ d 2 <input type="checkbox"/> Und. control <input type="checkbox"/> Other - Specify |
| | d. About how long did -- have this condition? | ____ month(s) ____ year(s) |

| HOSPITAL PAGE | | 1. Person number | USE YOUR CALENDAR | Probe | I.C. or Dum. |
|--|---|--|-------------------------------|---------|--------------|
| Enter month, day, year; if the exact date is not known, obtain the best estimate. | You said that -- was in the (hospital/nursing home) during the past year. | | Make sure the YEAR is correct | | |
| | 2. When did -- enter the (hospital/nursing home) (the last time)? | Month | Day | Year | |
| Do not include any nights in interview week. If the exact number is not known, accept the best estimate. | 3. How many nights was -- in the (hospital/nursing home)? | Total nights in hospital/nursing home | | | |
| Complete question 4 from entries in questions 2 and 3 if not clear, ask the questions. | 4a. How many of these -- nights were during the past 12 months? | Nights past 12 months | | | |
| Do not include any nights in interview week. | b. How many of these -- nights were during the past 2 weeks? | Nights past 2 weeks | | | |
| If medical name not known, enter an adequate description. | c. Was -- still in the (hospital/nursing home) last Sunday night for this hospitalization (stay)? | 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No | | | |
| Entry must show CAUSE, KIND, and PART OF BODY in same detail as required for the Condition page. | 5a. For what condition did -- enter the (hospital/nursing home) -- do you know the medical name? | Condition | | | |
| | For delivery ask: Was this a normal delivery? | Cause | | | |
| | For newborn, ask: Was the baby normal at birth? | Kind | | | |
| | | Part of body | | | |
| Ask for all conditions except deliveries and births | 6. Was this the first time -- was hospitalized for . . . ? | 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No | | | |
| If name of operation is not known, describe what was done. | 7a. Were any operations performed on -- during this stay at the (hospital/ nursing home.)? | <input type="checkbox"/> Yes 2 <input type="checkbox"/> No-Go to 8 | | | |
| | b. What was the name of the operation? | Operation | | | |
| | c. Any other operations? | <input type="checkbox"/> Yes-Describe <input type="checkbox"/> No | | | |
| Enter the full name of the hospital or nursing home; the street or highway on which it is located, and the city and State; if the city is not known, enter the county. | 8. What is the name and address of the (hospital/nursing home)? | Name of Hospital: | | | |
| | Street | City (or county) | | State | |
| Ask questions 9-18 for all completed hospitalizations - Mark one box | <input type="checkbox"/> "Yes" in Q4c - Go to Item 18 | Hospital Bill | | | |
| | <input type="checkbox"/> "No" in Q4c - Ask Q. 9 | Dollars | | Cents | |
| | 9. What was the total amount of the hospital (nursing home) bill for this stay? Do not include any doctor's or surgeon's bills. | | | | |
| | 10a. Did (will) health insurance pay any part of the hospital bill? | <input type="checkbox"/> Yes - Ask b <input type="checkbox"/> No - Go to 11 | | | |
| | b. What is the name of the Insurance Plan? | Name of Insurance Plan | | Dollars | Cents |
| | c. Did (will) any other health insurance plan pay part of this hospital (nursing home) bill? | <input type="checkbox"/> Yes - Reask b <input type="checkbox"/> No - Go to d | | | |
| | d. What was (will be) the amount paid by (Name of plan)? | For each Health Insurance Plan named, ask: | | | |
| Enter total amount paid by health insurance in line A Enter any amount paid by Social Security Medicare in line B | 11a. Who paid (will pay) the (remainder of the) hospital bill? | Source of Payment | | Dollars | Cents |
| | b. Did any other person or agency pay any other part of the hospital bill? | A. 1 <input type="checkbox"/> Health Insurance-All plans excl. Medicare | | | |
| | c. Who was this? | B. 2 <input type="checkbox"/> Social Security Medicare | | | |
| | d. What was the amount paid by --? | C. 3 <input type="checkbox"/> Self and Family | | | |
| | | D. 4 <input type="checkbox"/> Other (Specify) | | | |
| Interviewer: After totaling all sources of payment for the hospital bill, check one of the following boxes: | Total of above-include amount paid by health insurance | | | | |
| <input type="checkbox"/> Total amount paid (to be paid) agrees with amount of the hospital bill - Go to Q. 12 | | | | | |
| <input type="checkbox"/> Total amount paid (to be paid) does not agree with amount of the hospital bill-Resolve difference with respondent | | | | | |

HOSPITAL PAGE (Cont'd)

| Doctor/Surgeon | |
|----------------|-------|
| Dollars | Cents |
| | |

12a. What was the amount of the doctor's and surgeon's bill for this stay?

b. Is the \$ _____ for the doctor's and surgeon's bill included in the \$ _____ amount you gave me for the hospital bill?

- 1 Yes (In a footnote, indicate the actual amount of the hospital bill after deducting the doctor's and surgeon's bills, also indicate any changes in the amounts paid by health insurance or other sources if the entries in Qs. 10 and 11 include payments for expenses other than the hospital bill). 2 No—Go to 13

13a. Did (will) health insurance pay any part of the doctor's and surgeon's bill? Yes No—Go to 14

b. What is the name of the Insurance Plan?

c. Did (will) any other health insurance plan pay part of the doctor's and surgeon's bill?

- Yes—Reask b No—Ask d

For each Health Insurance Plan named, ask:

d. What was (will be) the amount paid by (Name of plan)?

| Name of Insurance Plan | Dollars | Cents |
|------------------------|---------|-------|
| | | |
| | | |

14a. Who paid (will pay) the (remainder of the) doctor's and surgeon's bill?
Enter total amount paid by health insurance in line A
Enter any amount paid by Social Security Medicare in line B

b. Did any other person or agency pay any other part of the doctor's and surgeon's bill?

- Yes—Ask c No—Go to d

c. Who was this?

d. What was the amount paid by —?

| Source of Payment | Dollars | Cents |
|---|---------|-------|
| A. 1 <input type="checkbox"/> Health Insurance—All plans excl. Medicare | | |
| B. 2 <input type="checkbox"/> Social Security Medicare | | |
| C. 3 <input type="checkbox"/> Self and Family | | |
| D. 4 <input type="checkbox"/> Other—Specify _____ | | |

Interviewer: After totaling all sources of payment for the doctor's and surgeon's bill, check one of the following boxes:

- Total amount paid (to be paid) agrees with amount of doctor's bill—Go to Q. 15
 Total amount paid (to be paid) does not agree with amount of the doctor's bill—Resolve difference with respondent

Total of above—include amount paid by health insurance →

Mark one box Under \$5—Go to 18 \$5 and over—Ask 15a

15a. When — left (name of hospital/nursing home) did he return home or go some other place?

- Home—Go to 16 Some other place—Ask 15b

b. What kind of place did — go to? Specify _____

Interviewer: If the place in 15b is a hospital, nursing home or similar place, was a hospital page filled for that stay?

- Hospital page filled—Stop Hospital page not filled—Fill hospital page for unreported stay

16. After leaving the hospital (nursing home) how many days did — have to remain in bed all or most of the day?

000 None xxx Still in bed days

17. ALTOGETHER how many days was — confined to the house after returning home from the hospital (nursing home)?

000 None xxx Still confined to house days

18.

NOTE TO INTERVIEWER

If the condition in Q.5 or 7 is listed in item AA on the Condition Page or any part of this hospitalization was during the past 2 weeks the condition must have a completed Condition Page. If the condition does not have a Condition page, fill one after completing all required Hospital pages.

| DOCTOR VISITS (1) | | First Visit | Dum. | | | | |
|--|--|---|---|---------|-------|--|--|
| | 1. Person number | <input style="width: 80%;" type="text"/> | | | | | |
| Record each date on which a Doctor was visited in a separate question 2a of the Doctor Visits questions. | Earlier you told me that -- had seen or talked to a doctor during the past 2 weeks. | 2a. On what dates during that 2-week period did -- visit or talk to a doctor? Month <input style="width: 40px;" type="text"/> | Day <input style="width: 40px;" type="text"/> | | | | |
| Ask and record the answer to question 2b on the last set of Doctor Visits questions for each person. | b. Were there any other doctor visits for -- during that period? <input type="checkbox"/> Yes--Reask Q. 2a <input type="checkbox"/> No--Ask Q. 3-5 for each visit | | | | | | |
| FOOTNOTES: | 3. Where did -- see the doctor on the (Date)? <i>Mark one</i> | | | | | | |
| | 01 <input type="checkbox"/> Home 20 <input type="checkbox"/> Doctor's Office 40 <input type="checkbox"/> Hospital Out-patient Clinic 70 <input type="checkbox"/> Health Department 10 <input type="checkbox"/> Telephone 30 <input type="checkbox"/> Pre-paid Insurance Group 50 <input type="checkbox"/> Hospital Emergency Room 80 <input type="checkbox"/> Company or Industry 90 <input type="checkbox"/> Other--Specify _____ xx <input type="checkbox"/> While inpatient in hospital --Stop | | | | | | |
| | 4. How much was the doctor's bill for that visit (call)? | | | | | | |
| | If bill not received, ask: | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th style="width: 50%;">Dollars</th><th style="width: 50%;">Cents</th></tr> <tr><td style="height: 20px;"> </td><td style="height: 20px;"> </td></tr> </table> | Dollars | Cents | | |
| Dollars | Cents | | | | | | |
| | | | | | | | |
| | How much do you expect the doctor's bill to be for that visit (call)? | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th style="width: 50%;">Dollars</th><th style="width: 50%;">Cents</th></tr> <tr><td style="height: 20px;"> </td><td style="height: 20px;"> </td></tr> </table> | Dollars | Cents | | |
| Dollars | Cents | | | | | | |
| | | | | | | | |
| | 5. Is the doctor a general practitioner or a specialist? | | | | | | |
| | <input type="checkbox"/> General Practitioner <input type="checkbox"/> Specialist If "Specialist" ask: What kind of specialist is he? → | | | | | | |
| | <input style="width: 80%; height: 20px;" type="text"/> | | | | | | |
| DOCTOR VISITS (2) | | First Visit | Dum. | | | | |
| | 1. Person number | <input style="width: 80%;" type="text"/> | | | | | |
| Record each date on which a Doctor was visited in a separate question 2a of the Doctor Visits questions. | Earlier you told me that -- had seen or talked to a doctor during the past 2 weeks. | 2a. On what dates during that 2-week period did -- visit or talk to a doctor? Month <input style="width: 40px;" type="text"/> | Day <input style="width: 40px;" type="text"/> | | | | |
| | b. Were there any other doctor visits for -- during that period? <input type="checkbox"/> Yes--Reask Q. 2a <input type="checkbox"/> No--Ask Q. 3-5 for each visit | | | | | | |
| FOOTNOTES: | 3. Where did -- see the doctor on the (Date)? <i>Mark one</i> | | | | | | |
| | 01 <input type="checkbox"/> Home 20 <input type="checkbox"/> Doctor's Office 40 <input type="checkbox"/> Hospital Out-patient Clinic 70 <input type="checkbox"/> Health Department 10 <input type="checkbox"/> Telephone 30 <input type="checkbox"/> Pre-paid Insurance Group 50 <input type="checkbox"/> Hospital Emergency Room 80 <input type="checkbox"/> Company or Industry 90 <input type="checkbox"/> Other--Specify _____ xx <input type="checkbox"/> While inpatient in hospital --Stop | | | | | | |
| | 4. How much was the doctor's bill for that visit (call)? | | | | | | |
| | If bill not received, ask: | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th style="width: 50%;">Dollars</th><th style="width: 50%;">Cents</th></tr> <tr><td style="height: 20px;"> </td><td style="height: 20px;"> </td></tr> </table> | Dollars | Cents | | |
| Dollars | Cents | | | | | | |
| | | | | | | | |
| | How much do you expect the doctor's bill to be for that visit (call)? | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><th style="width: 50%;">Dollars</th><th style="width: 50%;">Cents</th></tr> <tr><td style="height: 20px;"> </td><td style="height: 20px;"> </td></tr> </table> | Dollars | Cents | | |
| Dollars | Cents | | | | | | |
| | | | | | | | |
| | 5. Is the doctor a general practitioner or a specialist? | | | | | | |
| | <input type="checkbox"/> General Practitioner <input type="checkbox"/> Specialist If "Specialist" ask: What kind of specialist is he? → | | | | | | |
| | <input style="width: 80%; height: 20px;" type="text"/> | | | | | | |

| HOME CARE PAGE | | Person No. | Control | | | | | | | |
|--|--|------------|-------------------|-----|---|--|--|--|--|--|
| <p>Earlier in the interview you mentioned that -- needed help of some kind here at home. I am going to read a list of different kinds of personal care some people need in the home. Please tell me if -- needs help in any of the following ways.</p> | | 2 | No | Yes | For each "Yes" answer to 1a, Ask: | | | | | |
| | | | 1b. Who helps --? | | Does anyone else help --? | | | | | |
| <p>1a. Does -- need help --</p> <p> In walking up stairs or getting from room to room? . . .</p> <p> In dressing or putting on shoes?</p> | | | | | | <input type="checkbox"/> No | | | | |
| <p>Does -- need help --</p> <p> with bathing (shaving) or other toilet activities?</p> <p> in eating or having meals served in bed?</p> | | | | | | <input type="checkbox"/> No | | | | |
| <p>Does -- need help --</p> <p> with changing bandages?</p> <p> in receiving injections?</p> <p> with other treatments?</p> <p> If "Yes," ask: What kinds of treatment?</p> <p>Specify _____</p> | | | | | | <input type="checkbox"/> No | | | | |
| <p>Does -- need help --</p> <p> in changing bed positions?</p> <p> in exercising or physical therapy?</p> <p> in cutting toenails?</p> | | | | | | <input type="checkbox"/> No | | | | |
| <p>Does -- get any OTHER help or care here at home?</p> <p> If "Yes," ask: What kinds of other help or care?</p> <p>Specify _____</p> | | | | | | <input type="checkbox"/> No | | | | |
| <p>IF PERSON IS NOT RECEIVING CARE (All "No's" to question 1a), reconcile differences between answers in Q. 25 or 26c and Q. 1a above or describe the situation in the footnote space below.</p> | | | | | | | | | | |
| <p>2. For what condition(s) does -- receive this help or care? → Specify condition(s) _____</p> | | | | | | <table border="1"> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> | | | | |
| | | | | | | | | | | |
| <p>3. How long has -- received help or care at home? Mark one box:</p> <p>0 <input type="checkbox"/> 1 month or less 3 <input type="checkbox"/> Over 1 to 3 years</p> <p>1 <input type="checkbox"/> Over 1 to 6 months 4 <input type="checkbox"/> Over 3 to 5 years</p> <p>2 <input type="checkbox"/> Over 6 to 12 months 5 <input type="checkbox"/> Over 5 years</p> | | | | | | | | | | |
| <p>4. Because of --'s health, must someone be in the house with him all of the time, part of the time, or only when providing the needed help or care?</p> <p>1 <input type="checkbox"/> All of the time</p> <p>2 <input type="checkbox"/> Part of the time</p> <p>3 <input type="checkbox"/> Only when providing the needed help or care</p> | | | | | | | | | | |
| <p>For each person, other than a nurse, listed in 1b, ask:</p> <p>5a. Is -- a nurse, a physical therapist, or some other kind of health worker?</p> <p> If "Nurse" reported in Q. 1b or 5a, ask:</p> <p>5b. Is the nurse that cares for -- a registered nurse, a practical nurse, or some other kind of nurse?</p> | | | | | <p>(Determine the type(s) of person(s) providing the care in question 1 and mark appropriate box in column (1) of Table H.)</p> | | | | | |
| <p>FOOTNOTES:</p> | | | | | | | | | | |

TABLE H

| Type of persons providing care (1) | | During the past two weeks on about how many days did -- receive help or care from (relative, nurse, etc.)? | | About how many hours a day does -- receive help or care from (relative, nurse, etc.)? | | | Is (relative, nurse, etc.) paid for these services? | | |
|---|--|---|---------------|--|---|---|--|------------------------------------|---|
| | | (2) | | (3) | | | (4) | | |
| | | Days | XX Don't know | Hours | 00 Less than 1 hour | XX Don't know | 1 Yes | 2 No | |
| NON-HEALTH WORKERS | A. 8 <input type="checkbox"/> Related household members | | | | | | | | |
| | B. 1 <input type="checkbox"/> Related persons not in household | | | | | | | | |
| | C. 2 <input type="checkbox"/> Friend or neighbor | | | | | | | | |
| | D. 3 <input type="checkbox"/> Other | | | | | | | | |
| | Specify _____ | | | | | | | | |
| HEALTH WORKERS | E. 4 <input type="checkbox"/> Nurse -- Registered | | | | | | | | |
| | F. 5 <input type="checkbox"/> Nurse -- Practical or other | | | | | | | | |
| | G. 6 <input type="checkbox"/> Physical therapist | | | | | | | | |
| | H. 7 <input type="checkbox"/> Other | | | | | | | | |
| | Specify _____ | | | | | | | | |
| INTERVIEWER: Mark the appropriate box before going to Q's 6-8. <input type="checkbox"/> Person 65+ and "Yes" in column (4). Ask Q's 6, 7, and 8. <input type="checkbox"/> Person 55-64 and "Yes" in column (4). Ask Q's 7 and 8. <input type="checkbox"/> All "No's" in column (4) or only "A" checked in column (1) of Table H. Skip to question 8. | | | | | | | | | |
| 6. Are any of these services paid for by Medicare? | | | | 1 <input type="checkbox"/> Yes | 2 <input type="checkbox"/> No | X <input type="checkbox"/> Don't know | | | |
| 7a. Who pays (the remainder of the bill) for these services? b. Anyone else? | | | | 1 <input type="checkbox"/> Self or family | 2 <input type="checkbox"/> Other relative or friend | 3 <input type="checkbox"/> Health insurance | 4 <input type="checkbox"/> Agency or organization (Visiting Nurses Association, etc.) | 5 <input type="checkbox"/> Welfare | 6 <input type="checkbox"/> Other -- Specify _____ |
| 8a. During the past 12 months, has -- received any care at home from a nurse? | | | | | | <input type="checkbox"/> Yes -- Ask 8b 000 <input type="checkbox"/> No -- Stop Number of visits _____ | | | |
| b. During the past 12 months, ABOUT how many visits did a nurse make to care for -- ? | | | | | | | | | |
| FOOTNOTES: | | | | | | WASHINGTON USE | | | |

Ask for all persons 14 years of age and older:

28a. Has -- driven a motor vehicle during the past 12 months?

28a. xv Under 14 years } Go to next person
 xx No }
 Yes - Ask 28b

b. How many years has -- been driving?

b. 00 Less than 1 year
 _____ Number of years

R For persons 19 years old or over, show who responded for (or was present during the asking of) Q. 5-28. If persons responded for self, show whether entirely or partly. For persons under 19 show who responded for them. If eligible respondent is "at home" but did not respond for self, enter the reason in a footnote.

R 0 Responded for self-entirely
 1 Responded for self-partly
 Person _____ was respondent

These next questions are about health insurance. We are interested in all kinds of health insurance which pays for MOST KINDS of illness. However, we do not want to include insurance which pays ONLY for accidents.

29a. Is anyone in the family covered by a health insurance plan which pays all or part of a hospital bill?

Yes-Ask b and c No-Go to 30a

b. What is the name of the plan? - Record in Table H. I.

c. Is anyone in the family covered by any other health insurance plan which pays all or part of a hospital bill?

Yes-Reask b and c No-Complete Table H.I. for each plan reported

30a. (Besides the -- plan you told me about) Is anyone in the family covered by a health insurance plan which pays all or part of a surgeon's bill?

Yes-Ask b and c No-Go to 31a

b. What is the name of the plan? - Record in Table H.I.

c. Is anyone in the family covered by any other health insurance plan which pays all or part of a surgeon's bill?

Yes-Reask b and c No-Complete Table H.I. for each plan reported

31a. (Besides the -- plan you told me about) Is anyone in the family covered by a health insurance plan which pays all or part of a doctor's bill for home calls or office visits?

Yes-Ask b and c No-Go to 32a

b. What is the name of the plan?

c. Is anyone in the family covered by any other health insurance plan which pays all or part of a doctor's bill for home calls or office visits?

Yes-Reask b and c No-Complete Table H.I. for each plan reported

32a. (Besides the -- plan you told me about) Is anyone in the family covered by a deductible health insurance plan which pays some part of a bill for doctor visits or for hospital or surgical care, after a certain amount has been paid by the family?

Yes-Ask b and c No-Go to 33a

b. What is the name of the plan?

c. Is anyone in the family covered by any other deductible health insurance plan which pays some part of a bill for doctor visits or for hospital or surgical care after a certain amount has been paid by the family?

Yes-Reask b and c No-Complete Table H.I. for each plan reported

INTERVIEWER CHECK ITEM:

Mark one box for each person →

Und. 65-Go to next person
 65 or over-Ask 33a

33a. Is -- covered by that part of Social Security Medicare which pays for doctor visits; that is the Medicare plan for which he or some agency must pay \$3.00 a month?

If person is covered by any insurance plan in Table H.I. ask for EACH plan:

b. Is this the (name of plan) you told me about before?

Yes-Ask b
 No-Go to next person

| | | |
|------------------------------|------------------------------|------------------------------|
| Line No. _____ | Line No. _____ | Line No. _____ |
| <input type="checkbox"/> Yes | <input type="checkbox"/> Yes | <input type="checkbox"/> Yes |
| <input type="checkbox"/> No | <input type="checkbox"/> No | <input type="checkbox"/> No |

Go to next person

FOOTNOTES:

| WASH. USE ONLY | | | |
|----------------|--------------|-----------------|------------------|
| | Type of Plan | Number of Plans | Coverage of Head |
| H | | | |
| S | | | |
| D | | | |

TABLE H. I.

| Line No. | Name of Plan (1) | Does this plan pay all or part of a hospital bill? | Does this plan pay all or part of a surgeon's bill? | Does this plan pay all or part of a doctor's bill for home calls or office visits? | Does this plan pay any part of a doctor's bill for home calls or office visits after a certain amount has been paid by the family? | Which members of the family are covered by (name of plan)? Circle column numbers | If 2 or more members of family covered by this plan ask: Are all of these persons covered by the same policy? | For each person 65+ covered by this plan ask: Is this (name of plan) which covers -- a Social Security Medicare plan? | | | | | | |
|----------------|---------------------|---|---|---|--|---|--|--|--|---|---|----------------|-----------------|------------------|
| | | (2) | (3) | (4) | (5) | (6) | (7) | (8) | | | | | | |
| A | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| B | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| C | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| D | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| E | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| F | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| G | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| H | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes-Go to 6 <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | Covered: 1 2 3 4 5 6 Not covered: 1 2 3 4 5 6 | <input type="checkbox"/> Yes <input type="checkbox"/> No-Fill separate line for each policy | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Pers. No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| | | <input type="checkbox"/> Und. 65-Go to next person <input type="checkbox"/> 65 or over-Ask 33a | | <input type="checkbox"/> Und. 65-Go to next person <input type="checkbox"/> 65 or over-Ask 33a | | <input type="checkbox"/> Und. 65-Go to next person <input type="checkbox"/> 65 or over-Ask 33a | | <input type="checkbox"/> Und. 65-Go to next person <input type="checkbox"/> 65 or over-Ask 33a | | <input type="checkbox"/> Und. 65-Go to next person <input type="checkbox"/> 65 or over-Ask 33a | | | | |
| | | <input type="checkbox"/> Yes-Ask b <input type="checkbox"/> No-Go to next person | | <input type="checkbox"/> Yes-Ask b <input type="checkbox"/> No-Go to next person | | <input type="checkbox"/> Yes-Ask b <input type="checkbox"/> No-Go to next person | | <input type="checkbox"/> Yes-Ask b <input type="checkbox"/> No-Go to next person | | <input type="checkbox"/> Yes-Ask b <input type="checkbox"/> No-Go to next person | | | | |
| | | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | Line No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| | | Go to next person | | Go to next person | | Go to next person | | Go to next person | | Go to next person | | | | |
| WASH. USE ONLY | | | WASH. USE ONLY | | | WASH. USE ONLY | | | WASH. USE ONLY | | | WASH. USE ONLY | | |
| Type of Plan | Number of Plans | Coverage of Head | Type of Plan | Number of Plans | Coverage of Head | Type of Plan | Number of Plans | Coverage of Head | Type of Plan | Number of Plans | Coverage of Head | Type of Plan | Number of Plans | Coverage of Head |
| H | | | H | | | H | | | H | | | H | | |
| S | | | S | | | S | | | S | | | S | | |
| D | | | D | | | D | | | D | | | D | | |

| | | |
|--|--|---|
| <p>If 17 years old or over, ask:</p> <p>34a. What is the highest grade -- attended in school?</p> | | <p>Go to</p> <p><input type="checkbox"/> Und. 17 yrs. - next person</p> <p><input type="checkbox"/> None</p> <p>Elem: 1 2 3 4 5 6 7 8</p> <p>High: 9 10 11 12</p> <p>College: 1 2 3 4 5+</p> |
| <p>b. Did -- finish the -- grade (year)?</p> | | <p>b. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>Ask for all males 17 years old or over.</p> <p>35a. Did -- ever serve in the Armed Forces of the United States?</p> | | <p><input type="checkbox"/> Yes* <input type="checkbox"/> No } Go to 36</p> <p>Ask b } <input type="checkbox"/> Female }</p> |
| <p>b. Was any of his service during a war?</p> | | <p>b. <input type="checkbox"/> Yes <input type="checkbox"/> No } Ask 35c</p> <p>Stop } <input type="checkbox"/> DK }</p> |
| <p>c. Was any of his service between June 27, 1950, and January 31, 1955?</p> | | <p>c. <input type="checkbox"/> Yes <input type="checkbox"/> No } Ask 35d</p> <p>Stop } <input type="checkbox"/> DK }</p> |
| <p>d. Was any of his service after January 31, 1955?</p> | | <p>d. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK</p> |
| <p>Ask for all persons 17 years old or over.</p> <p>36a. Did -- work at any time last week or the week before?--For females add: Not counting work around the house.</p> | | <p>1 <input type="checkbox"/> Yes - Go to 37a</p> <p>2 <input type="checkbox"/> No - Ask both b and c</p> |
| <p>b. Even though -- did not work during those 2 weeks, does he have a job or business?</p> | | <p>b. 2 <input type="checkbox"/> Yes - Ask a <input type="checkbox"/> No - Ask c</p> |
| <p>c. Was he looking for work or on layoff from a job?</p> | | <p>c. <input type="checkbox"/> Yes - Ask d <input type="checkbox"/> No - Omit d</p> |
| <p>d. Which -- looking for work or on layoff from a job?</p> | | <p>d. 1 <input type="checkbox"/> Looking</p> <p>2 <input type="checkbox"/> Layoff 3 <input type="checkbox"/> Both</p> |
| <p>If "Yes" in 36c only, questions 37a through 37d apply to this person's LAST full-time civilian job.</p> | <p>Ask for all persons with a "Yes" in 36a, 36b, or 36c.</p> <p>37a. Who does (did) -- work for?</p> | <p>37a. Employer</p> |
| <p>b. What kind of business or industry is this?</p> | | <p>b. Industry</p> |
| <p>c. What kind of work is (was) -- doing?</p> | | <p>c. Occupation</p> |
| <p>Fill 37d from entries in 37a-37c, if not clear, ask:</p> <p>d. Class of worker</p> | | <p>d. 0 <input type="checkbox"/> Pvt. pd. 3 <input type="checkbox"/> Own</p> <p>1 <input type="checkbox"/> Gov. Fed. 4 <input type="checkbox"/> Non-pd.</p> <p>2 <input type="checkbox"/> Gov. Oth. 5 <input type="checkbox"/> Nev. worked</p> |
| <p>INTERVIEWER CHECK ITEM:</p> | | <p>4 <input type="checkbox"/> Not in Labor Force or Under 17</p> |
| <p>If person is under 17 years, or not in Labor Force (Q. 37 a-d blank) check "Not in Labor Force."</p> | | <p>0 <input type="checkbox"/> No work-loss days-in LF</p> <p>Go to next person</p> |
| <p>If in Labor Force (Q. 37 filled) refer to Question 5e and make appropriate entry.</p> | | <p><input type="checkbox"/> Work-loss days _____</p> <p>Go to 38a</p> |
| <p>Earlier you said that -- lost -- days from work during the past 2 weeks - (If self-employed, ask b; for other workers, ask a)</p> <p>38a. Was -- paid any wages by his employer for the days that he lost?</p> | | <p>1 <input type="checkbox"/> Yes - Ask c <input type="checkbox"/> No - Ask b</p> |
| <p>b. Does -- have any insurance that pays him for the income he lost on these days?</p> | | <p>b. 2 <input type="checkbox"/> Yes - Ask c 3 <input type="checkbox"/> No - Ask d</p> |
| <p>c. Did he receive his full day's pay for all of these -- days he lost?</p> | | <p>c. 1 <input type="checkbox"/> Yes - Ask f 2 <input type="checkbox"/> No - Ask d & e</p> |
| <p>d. In total, how much income did -- lose because of the -- days he lost from work?</p> | | <p>d. \$ _____</p> |
| <p>e. Is this before or after taxes?</p> | | <p>e. 1 <input type="checkbox"/> Before 2 <input type="checkbox"/> After</p> |
| <p>f. How much does -- usually earn per week?</p> | | <p>f. \$ _____</p> |
| <p>g. Is this before or after taxes?</p> | | <p>g. 1 <input type="checkbox"/> Before 2 <input type="checkbox"/> After</p> |
| <p>h. Did -- receive this income for these days through a sick leave plan, loss-of-pay insurance, or some other way?</p> | | <p>h. 1 <input type="checkbox"/> Sick leave plan</p> <p>2 <input type="checkbox"/> Loss-of-pay insurance</p> <p>3 <input type="checkbox"/> Other - Specify _____</p> |
| <p>39. Which of these income groups represents your total combined family income for the past 12 months - that is, yours, your --'s etc.? (Show Card I) Include income from all sources such as wages, salaries, social security or retirement benefits, help from relatives, rents from property, and so forth.</p> | | <p>39. Group ① 7 <input type="checkbox"/> G</p> <p>1 <input type="checkbox"/> A 4 <input type="checkbox"/> D 8 <input type="checkbox"/> H</p> <p>2 <input type="checkbox"/> B 5 <input type="checkbox"/> E 9 <input type="checkbox"/> I</p> <p>3 <input type="checkbox"/> C 6 <input type="checkbox"/> F X <input type="checkbox"/> J</p> |

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